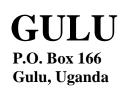
GRADUATE





UNIVERSITY

Tel: +256-471-433573 Email: ar@gu.ac.ug URL: www.gu.ac.ug Recent applicants' passport size photograph

OFFICE OF THE ACADEMIC REGISTRAR

APPLICATION FORM FOR ADMISSION TO MASTER DEGREE AND POSTGRADUATE DIPLOMA PROGRAMMES

PRIVATE SPONSORSHIP

1.	Indicate the Programme of your choice: Use the 3-letter Code for the programmes shown in the advertisement.						
	Programme Code						
2.	a) Surname (Block letters)						
	b) Other Names (in full)						
3.	Sex [] Female [] Male. Date of birth [DD/MM/YYYY]:/						
4.	Home District: Sub-county: Village:						
5.	Citizenship: Country of Residence:						
	Religious Affiliation:						
6.	Permanent Address:						
7.	Telephone Number(s):						
8.	Degree(s) Obtained:						
	Institution Attended Qualification Obtained Year Obtained						
9.	Postgraduate Diploma(s) Obtained (where applicable)						
	Institution Attended Qualification Obtained Year Obtained						

Inst	itution Attended		Qualification Obtain	ned	Year Ot	otained
 Uga	anda Advanced Certificate	e of Education	(U.A.C.E) or its Equiv	alent:		
a)	Name of School					
b)	Index Number					
c)	Year of Examination					
Ger	neral Paper					
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Note.

- 1. Please attach the following:
 - Copies of academic documents
 - <u>original receipt</u> and <u>bank pay-in-slip</u> as evidence of payment of the application fee.
- 2. Also make sure you photocopy <u>Page 1 of this Application Form</u>, with your photo attached, which must be produced by successful candidates before receiving Admission Letter.