

THE UGANDA PENTECOSTAL UNIVERSITY

“Fortis et Libre”



Main Campus

Kahungabunyonyi Campus
P.O .Box 249 Fort Portal-Uganda
Tel: +256 782 319 447/
+256 779 089 170
E-mail: kahunga@upu.ac.ug
kamwenge@upu.ac.ug

Kampala Campus

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Tel: +256 312 518 128
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upubusinesscom@gmail.com

APPLICATION FORM FOR ENTRY INTO THE UGANDA PENTECOSTAL UNIVERSITY FOR THE ACADEMIC YEAR 2016/2017

Attach
Recent
Passport
Photo

To the course leading to:

Programme: Day Weekend

SECTION ONE: PERSONAL DATA

Surname: Other Name

Gender: Male Female

Date of Birth / / Place of Birth:

Home District: Country of Origin

Country of Residence:

Citizenship/Nationality:

Marital Status:

No. of Children: Ages:

Home Address:

Town: Village:

Sub County: County:

Telephone: E-mail:

Next of Kin Information:

Name:

Address:

Telephone: Fax:

E-mail:

University mature Age entrance Examinations:

Year:

Index No

Examining University:

(Attach Certified Copy of results)

Other Post Secondary Education qualifications

(Attach Certified Copy of results)

If you left school give brief details of employment or Course(s) of study undertaken

You may use a separate sheet or paper.

SECTION THREE: SPONSORING BODY

Name of Sponsor:

Address:

Telephone

E-mail

Fax

SECTION FOUR: DECLARATION

I declare that all information given in this form is correct

Name:

Signature:

Date:

SECTION FIVE: FOR OFFICIAL USE ONLY

Application Ref:

Faculty/Department:

Course:

Remarks:

Sign:

Designation: