



## SCHOOL OF ORNITHOLOGY

OFFICE OF THE ACADEMIC REGISTRAR  
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*Affix Current  
Passport size  
photograph here*

### APPLICATION FORM

**COURSE APPLIED FOR** .....

#### Instructions to Applicants

- This Form must be completed by **Applicants** who are seeking admission.
- All names must be written in full (**NO** initials) as they appear on the academic documents and the form must be filled in **CAPITAL LETTERS**.

#### Personal Information

Surname (*as it appears on your Academic documents*): .....

Other Name: .....

Sex: .....

Home District: ..... Nationality: .....

Contact cell-phone.....Email.....

#### Sponsorship

Self ☐ Parent/Guardian /Organisation ☐ if so, then give detail

Parent/Sponsor Name: ..... Nationality: .....

Phone contact.....Postal Address.....Email: .....

#### Educational Background

| Award | Year of completion | Awarding Institution | Class/Grade of Award |
|-------|--------------------|----------------------|----------------------|
|       |                    |                      |                      |
|       |                    |                      |                      |
|       |                    |                      |                      |

#### Employment History (*where applicable*)

| Employer | Position | Duration |     |
|----------|----------|----------|-----|
|          |          | From;    | To; |
|          |          | From;    | To; |

**Note;** -Application process is **free of charge**

-Completed Application forms, should be returned to the ACUS offices or emailed on [ar@acus.ac.ug](mailto:ar@acus.ac.ug)

#### Declaration by Applicant

I declare that to the best of my knowledge, the information provided above is correct.

Signature of applicant.....Date.....