



Office of the Academic Registrar

Affix here your recent passport size photograph with your name and Index Number at the back

**APPLICATION FOR INTERNATIONAL TECHNICAL CERTIFICATES
IN OIL AND GAS ACADEMIC YEAR 2024/2025**

Fill in **BLOCK LETTERS** and return the completed Form to:

THE ACADEMIC REGISTRAR
UGANDA TECHNICAL COLLEGE – KICHWAMBA
P.O. BOX 33, FORT PORTAL

OR

utkichwamba@gmail.com

1. NAME IN FULL (Surname first):

2. NATIONAL IDENTITY NUMBER (NIN):.....

3. Other Personal Information:

a) Date of Birth (MM/DD/YY).....

b) Marital Status:.....

c) No. Of Dependants:.....

d) Email Address :.....

e) Phone Number: :.....

f) Permanent Address:.....

g) Permanent Ugandan Resident: Yes No

h) District of Birth:.....

i) Parish (LC II):

j) Village (LC I)

4. Name and Address of the Sponsor:.....



MINISTRY OF EDUCATION AND SPORTS

Uganda Technical College – Bushenyi
Uganda Technical College – Elgon
Uganda Technical College – Kyema
Uganda Technical College – Lira

P.O. Box 81, Bushenyi
P.O. Box 940, Mbale
P.O. Box 473, Masindi
P.O. Box 4, Lira

Tel: +256 485 660 007
Tel: +256 454 436 197
Tel: +256 465 423 396
Tel: +256 473 420 916

5. Information About Guardian/Next Of Kin

a) Name.....b) occupation.....

c) Address..... d) Telephone Number.....

6. INDICATE THE TRAINING PROGRAMME FOR WHICH YOU WOULD LIKE TO APPLY BY PUTTING YOUR CHOICE (i.e) 1ST CHOICE IN THE RIGHT HAND COLUMN

International Certificate in	Choice
Welding and Metal Fabrication	
Electrical Installation	
Plumbing and Pipeline fitting	

7. Employment Record

Company Name	Position(held)	Skills Acquired	Year	
			From	To

8. Institutions Attended:

Year		Name of Institution	Qualification Obtained	Class Of Award(If Any)
From	to			

9. Schools Attended:

Year		Name of School	Qualification
From	to		

10. DECLARATION:

- (a) Ideclare that the information given on this form is correct.
- (b) If accepted for an academic programme, I agree to abide by the College Rules and Regulations.

.....
SIGNATURE OF APPLICANT

.....
Date

FOR OFFICIAL USE ONLY

ASSESSMENT REMARKS

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ADMITTED **NOT ADMITED**

ACADEMIC REGISTRAR'S OFFICE

Date of receiving this form:

Date of issuing Admission letter: