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"Seeking greater horizons in thought and action"

E-mail: ar@mru.ac.ug, Website: www.mru.ac.ug

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Office of the Academic Registrar Application Form for Admission to the University

P	Application	Form for Ac	imission to t	me Universi	ıy
To be completed l	by `A' Level Lea	avers/Diploma H	Holders		
Academic year for	which admissio	n is Sought e.g. 2	2012-2013		
NOTE: This Form	must be Submit	ted with Evidenc	e of Payment of A	Application Fee.	
		PA	RT 1		:
Fill in Using Capi	ital Letters				
. (a)Surname					
1. (b) Other Name			(C) Gen	der: Tick Male	Female
(d) Date of Birt	h: (DD)	MM	YY) (e)	Nationality	
	· (Yoi	ı must attach a C	opy of Birth Cert	ificate)	
(f) Home District.		(i) (Country		
(g) Any form of D	isability (if any)		(h) Religion.		
(1	Provide full size p	ohotograph depic	ting the disability	wher e possibl	le)
2, (a) Courses App	olied For				
(Use letter Codes	to select choice o	of Courses e.g. B	DS, DBM)		
1 st	2 nd	3 rd	4 th	5 th	6 th
		i i			

Subject										
Grade										
Summary of Gr	ades – Ug	anda C	ertificate	of Educa	tion					
Distinction (s)	Credit (s	s) F	ass (s)	Failu	re (s)					
Attach a photocop (a) Uganda Adv (car of Examinate Please indicate the	vanced Cer	rtificate	of Educa	tion (U.A	A.C.E) or	1		idex No.		
	1		2		3	4		5		6
Subject			2		3	4			+	6
Subject Grade Strictly attach a pl	l hotocopy o	f the Uz						3		6
Grade Strictly attach a pl	2.0	,	1CE Certij	ficate or i	ts equival	lent)	the Subjec		rades who	
Grade Strictly attach a pl b) Other equival pplicable.) Subject	2.0	the cas	ACE Certij e of Foreig	ficate or i	ts equival	l ent) indicate		ets and G		ere
Grade	2.0	the cas	ACE Certij e of Foreig	ficate or i	ts equival	l ent) indicate		ets and G		ere
Grade Strictly attach a pl b) Other equival pplicable.) Subject	lents:(For	the cass	ACE Certij e of Foreig 3 st qualifice	ficate or in Student 4	ts equival	lent) indicate	7	ets and Gr		ere

8. Information on Parents

(Father)	(Mother)
Surname	
Other Name	
Date of Birth	
Village of Birth	
Sub-County	
District (of Birth)	
Nationality	
Country of Residence	
Address	
Tel:	
E-mail	
'	
(Guardian) (s)	
Surname	Other Name
Date of Birth	Village of Birth
Sub-County	District (of Birth)
Nationality	Country of Residence
Address	Tel
Email	Fax
O. To be filled by the Applicant:	
Positions of Responsibility (ies) held while at School /C	College /University
	•
O Employment Description	

10. Employment Record

Give brief details of employment record (you may use a separate sheet)

Employer	Position (s) Held	Date (s)
,		

11. Give names of two persons in a respon	nsible position from whom confidential information can be obtained
(I) Name:	Position
Organisation	Address
Telephone Number (s)	Email
(ii) Name	Post
	Address
Telephone Number (s)	Email:
12. How did you come to know about M	Auteesa I Royal University:
(I) Radio (e.g CBS FM)	Specify:
(ii) Newspaper (e.g NEW VISION)	Specify:
(iii) Television (e.g BUKEDDE TV)	Specify:
(iv) Magazine- Specify:	
(v) Friend - Specify:	
Any other - Specify:	
13. Preffered Campus;	
a) Kirumba Masaka	b) Kakeeka Mengoc) Other
14. It should be Noted by the Applicant is information whenever discovered either a of Admission and Prosecution in the Ug	in case of impersonation, falsification of documents or incomplete at Registration or Afterwards will lead to Automatic Cancellation ganda Courts of Law.
15. Declaration by the Applicant	
I have noted and understood the implicat	tion of giving incorrect information, I confirm that information
given in this form is correct based to my	
	· · · · · · · · · · · · · · · · · · ·
Signature	Date