

## APPLICATION FORMS



ST. SIMON PETER'S VOCATIONAL TRAINING CENTRE.

P.OBox133, Hoima Tel: +256 780611815

Email: [sspvtc@gmail.com](mailto:sspvtc@gmail.com)

### APPLICATION FORM FOR ADMISSION TO CERTIFICATE PROGRAMME FOR ACADEMIC YEAR 2019.

(To be filled in capitals)

#### PART ONE (APPLICANT DETAILS)

1) Applicant details

a) Surname ..... Other Names .....

b) Gender: (**Tick** ) Male ☐ Female ☐

c) Date of birth..... (d) Age .....

e) Nationality:- ..... (f) Home District: .....

g) Religion:-.....

h) Permanent address:-.....Tel:-.....

i) Disability (**if any**)..... (j) Health problems (**if any**):-.....

2) Course applied for (**tick against the selected course**).

No.	Course name	Course code	Tick
1	National Certificate in Automotive Mechanics	NCAM	
2	National Certificate in Wood Technology	NCWT	
3	National Certificate in Building Construction	NCBC	
4	National Certificate in Plumbing	NCPL	
5	National Certificate in Electrical Systems & Maintenance	NCES	

6	National Certificate in Welding & Fabrication	NCWF	
7	National Certificate in Agriculture	NCA	

### 3) Section

a) Day ☐ b) Boarding ☐ (Tick)

4) Uganda Certificate of Education (UCE): Index No..... Year of Examination .....School.....

<b>SUBJECT</b>										
<b>GRADE</b>										

Attach a photocopy of Certificate / Slip

5) Uganda Advanced Certificate of Education (UACE):- Index No..... Year of Examination .....School .....

<b>SUBJECT</b>										
<b>GRADE</b>										

Attach a photocopy of Certificate / Slip

### 6) If any other qualification (specify)

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### 6) Attach to this form the following:-

- a) A Hand written application (b) Recommendation from your former Head Teacher.  
c) A true copy of your results. (d) Recommendation from your L.C.1 Chairperson.

### PART TWO (PARENT/GUARDIAN DETAILS)

#### 7) Information on Parent / Guardian (delete as appropriate)

- a) Surname:.....(b) Other name:.....  
c) Nationality :.....(d) Occupation:.....  
e) Country / District of residence:.....  
f) Address:.....Tel:-.....

8) **Declaration:** - I, the undersigned declare that the information give on this form is correct.

**Signature**..... **Date**.....