FISHERIES TRAINING INSTITUTE

P.O. BOX 124, ENTEBBE – UGANDA.

Telephone: 256 - 414 - 323010. Email: fisheries.institute@gmail.com

OFFICE OF THE ACADEMIC REGISTRAR APPLICATION FORM FOR ADMISSION

A copy of this form should be completed by the applicant and returned to the Institute.

Co	ourse applied for (Chose fr	om list on page 2)				
1						
		ademic year:				
2.	Surname:	name:				
3.	Other names:	er names:				
4.	Date of birth:	Pate of birth:				
5.	Citizenship:					
6.	Home district	ome district				
7.	Postal /Email Address:					
	Tel.No					
8.	Secondary Schools and colleges attended (attach copies of certificates)					
	i) O' Level					
	Name of school	Index No.	Date of attendance			
	ii) A' Level					
	Name of School	Index No	Date of attendance			
	iii) College (where applicable).					
	Name of Institution	Award	Date of attendance			

9.	Other qualifications (indicate dates and attach copies of Certificates).		
	•••••		
10		byment record (where applicable).	
10.	Lilipio	yment record (where applicable).	
	Names	s and address of two referees.	
	i)	Name:	
	ii)	Address:	
	iii)	Name:	
		Address:	
11.	Declar	ration by applicant:	
	I decla	are that to the best of my knowledge the information given above is correct.	
	Signat	ure of applicant	
	NOTE	Ε:	
1. Names must be those that appear on the applicant's academic		mes must be those that appear on the applicant's academic documents.	
		(Attach copies of your documents)	
	2. Cou	rrses offered include: -	
	(i)	Certificate in Fisheries Management and Technologies (2 years)	
	(ii)	National Certificate in Agricultural Production (2 years)	
	(iii)	Certificate in Boat building Technology and Marine Mechanics (2 years)	
	(iv)	Diploma in Fisheries Management and Technologies (2 years)	
	(v)	Diploma in Integrated Aquaculture and Agriculture (2 years)	
	(vi)	Up-grading Diploma in Fisheries Management & Technologies (1 year)	
	(vii)	Up- grading Diploma in Boat Building Technology & Marine Mechanics (1year)	