| S/No |
|------|
|------|



Attach one

recent colored Passports photo

MINISTRY OF EDUCATION AND SPORTS

DEPARTMENT OF TVET OPERATIONS AND MANAGEMENT

TVET SPONSORSHIP APPLICATION FORM FOR PERSONS WITH DISABILITIES 2025

SECTION A: INSTRUCTIONS

- i. This form is intended for Persons with Disabilities (PWDs) applicants:
 - a) undertaking Uganda Community Polytechnic Certificate, National Certificate and National Diploma in Technical Vocational Education and Training (TVET) in recognized public TVET Institutions under the Ministry of Education and Sports.
 - b) Wishing to join National diploma programs in recognized public TVET training Colleges under the Ministry of Education and Sports.
- ii. This form can be obtained from the Ministry of Education and Sports website on **www.education.go** or **tvet.go.ug.**
- iii. The form **MUST** be dully completed in duplicate and returned **not later than 7th March 2025**, to the Department of TVET Operations and Management office, Legacy Towers 3rd Floor, Wing B, Kyadondo Road **OR** scanned and submitted to lazakeh.galabuzi@education.go.ug.

iv. MUST attach;

- Photocopies of certificates/result slips/transcripts,
- Copy of the Admission letter where the applicant is enrolled.
- A copy of National Identity Card (for those 18 years and above) or an Identification from the previous institutions (for those below 18 years)
- A Copy(ies) of appointment/contract/recommendation of relevant work experience (if any).
- A Copy of Birth Certificate.
- A copy of a parent/ Guardian National ID (those below 18 years).
- Proof of medical assessment from the disability identified.

SECTION B: PARTICULARS OF APPLICANT (To be completed in capital letters by Applicant)

| I. | 1. Names | | ••••• |
|----|------------------|----------------------------------|-------|
| | Surname | Others names | |
| 2. | 2. NationalityDa | Pate of Birth Sex | |
| 3. | 3. Home District | County | |
| | Sub-county | Religious Affiliation (Optional) | |

| 4. | Physic | cal Address: | | | | |
|------|--------|----------------------|----------------|---|-----------------------|--------|
| | Parish | Vi | llage | • | Telephone Cont | act |
| | Parent | /Guardians Name | Telephone Cont | acts | | |
| | Parent | /Guardian NIN | | | | |
| SEC | CTION | N C: EDUCATIONAL I | BACKGROUND (| To be | completed by Applican | t) |
| a. | PLI | E results | | | | |
| | Nan | ne of School | | | Year of sitting | |
| | Inde | ex Number | Tot | al Agg | gregatesDivi | sion |
| Fill | in the | details | | | | |
| S | /N S | ubjects | Grade | | Subject | Grade |
| 1. | | | | 4. | | |
| 2. | | | | 5. | | |
| 3. | | | | 6. | | |
| | a. O | ' Level: UCE results | | | | |
| | Nan | ne of School | | | Year of sitting | |
| | Inde | ex Number | Tot | al Agg | gregatesDivi | sion |
| Fill | in the | details | | | | |
| S/I | N Su | bjects | Scores | S/N | Subjects | Scores |
| 1. | | | | 7. | | |
| 2. | | | | 8. | | |
| 3. | | | | 9. | | |
| 4. | | | | 10. | | |

| 5. | | | 11. | | |
|--------|------------------------------|--------------------|---------------|-----------------|--------|
| 6. | | | 12. | | |
| • | Technical School/Communi | ty Polytechnics: \ | U JTC | UCPC results | |
| | Name of Institution | | | | |
| | Course Name | | • • • • • • • | | |
| | Index Number | Gra | ade | | |
| ill in | the details | | | | |
| S/N | Course Subjects | Scores | S/N | Course Subjects | Scores |
| 1. | | | 4. | | |
| 2. | | | 5. | | |
| 3. | | | 6. | | |
| | | | | | |
| • | Technical/Vocational Institu | | | | |
| | Name of Institution | | | Year of sitting | ••••• |
| | Course Name | | | | |
| | Index Number | Gra | ade | | |
| ':11 i | the details | | | | |
| 111 11 | the details | | | | |
| S/N | Course Subjects | Scores | S/N | Course Subjects | Scores |
| 1. | | | 4. | | |
| | | | 5. | | |
| 2. | | | | | |
| 2. | | | 6. | | |

| Fill in | the details | | | | |
|---------|---------------------------------|------------|-----|----------------------|--------|
| S/N | Subjects | Scores | S/N | Subjects | Scores |
| 1. | | | 4. | | |
| 2. | | | 5. | | |
| 3. | | | 6. | | |
| | Any other Qualification(s) | | | | |
| ame | of Educational Institution/Univ | ersity | | | |
| ourse | e Name | | | | |
| ear o | of sittingR | Reg Number | | Class of Grade | |
| ill in | the details | | | | |
| S/N | Course unit/Subjects | Scores | S/N | Course unit/Subjects | Scores |
| 1. | | | 4. | | |
| 2. | | | 5. | | |
| 3. | | | 6. | | |
| | | | | | |
| Jame | of Educational Institution/Univ | ersity | | | |
| Course | e Name | | | | |
| | | | | Class of Grade | |
| | the details | | | | |
| S/N | Course unit/Subjects | Scores | S/N | Course unit/Subjects | Scores |
| 1. | | | 6. | | |

Index Number......points obtained.....

| • | | 7. | |
|-----|--|----------------------|----------------------------------|
| 3. | | 8. | |
| 4 | | 9. | |
| 5 | | 10. | |
| | ION D: RELEVANT WORK RECORD (IF Organization/Employer/ Self Employment | ANY) (Attach a separ | rate sheet if necessary) Period |
| | | | • |
| | | | • |
| S/N | | | • |

| ٥. | Course em oned for and category of disability |
|-----|---|
| | Level (UCPC, NC OR DIPLOMA): |
| | TVET Institution: |
| | Course |
| b) | Briefly explain your disability. |
| | |
| | |
| ••• | |
| 6. | Declaration |
| I | declare that to the best of my knowledge, the information |
| pro | ovided above is correct. |
| Sig | nature:Date: |

 $\underline{\underline{Note}}\textsc{:}$ Falsification of information can lead to cancellation of the offer and prosecution in the courts of law.

SECTION E: FOR OFFICIAL USE ONLY

| The committee has vetted and recommended that the applicant: | | | | | |
|--|-----------------------------|--------------------|--|--|--|
| i. | Be Sponsored | | | | |
| | Course | | | | |
| | Institution | | | | |
| ii. | Not be admitted; reasons | | | | |
| | | | | | |
| | | | | | |
| | ead of Selection committee | Signature and Date | | | |
| Other Remarks: | | | | | |
| | | | | | |
| | | | | | |
| He | ad of Department (TVET O&M) | Signature and Date | | | |