



FORUM FOR AFRICAN WOMEN EDUCATIONALISTS (FAWE) UGANDA CHAPTER

APPLICATION FORM - FOR ACADEMIC YEAR 2023/2024

Forum for African Women Educationalists (FAWE) Uganda Chapter has received a new grant from Forberg through Social Initiatives to support 75 youth (70% female and 30% male students) from economically disadvantaged backgrounds and regions of Eastern and Northern Uganda for the academic year 2023-2024. The objective of the program is to enable students from the selected districts complete higher education; and provide academic and psycho-social support and facilitate pathways for the students to internships, industrial practice and employment. Students from the districts of **Namayingo, Napak, Kween, Amuria, Abim, Luuka, Nwoya, Agago and Moyo** will be facilitated to access and complete Higher Education.

The program is being implemented in partnership with three universities; Busitema University, Mbarara University of Science and Technology, Gulu University, in addition to Jinja School of Nursing and Midwifery and Medical Laboratory Technology Training School Jinja and Uganda Technical College - Elgon.

FAWE Uganda is pleased to announce the availability of 75 bursaries to support the following categories of students; University undergraduates (30) slots, Diploma in Nursing (7) slots, Diploma in Medical Laboratory Technology (8) slots, Diploma in Civil, Water and Electrical Engineering at Uganda Technical College Elgon (10) slots, Certificate in Nursing and Midwifery (20) slots for the academic year 2023/2024.

Only Applicants/ students who have been admitted to the Partner/ learning institutions and coming from the 9 project districts mentioned above, are eligible for bursary support under this Program. Please note that this application form is **free of charge**. Applicants are advised to clearly read and understand the application guidelines before filling in the form. Only shortlisted candidates will be contacted to appear for interviews. The deadline for submission is **14th July 2023**.

PLEASE NOTE: FAWE-Uganda reserves the right to rescind an eventual bursary in case of any misrepresentation in this application and incomplete applications will not be considered.

SECTION A. APPLICANT'S PERSONAL INFORMATION

Surname (Family Name) as indicated on the national identification card or Baptism Certificate or school ID (Attach copy of ID)		First Name (Given Name)		Other Name (If Any)	
Date of Birth (DD/MM/YYYY) (attach a copy of birth certificate)	___/___/___	AGE _____	SEX Female <input type="checkbox"/> Male <input type="checkbox"/>		
Place of Birth	Village	Parish	Sub-County	District	
Native Language					
Current Contact Address					



Please attach a sketch map of your home from the nearest trading town or available institution to enable us locate you.





Description about yourself (Personal background, education and current status)

SECTION B. APPLICANT'S CONTACT INFORMATION DETAILS

Applicant's telephone number	
Applicant's email address	
Parent/ Guardian's Name and contact (Active telephone number/email)	
Alternative contact person in addition to Parent/guardian who is likely to know	
Physical Address	

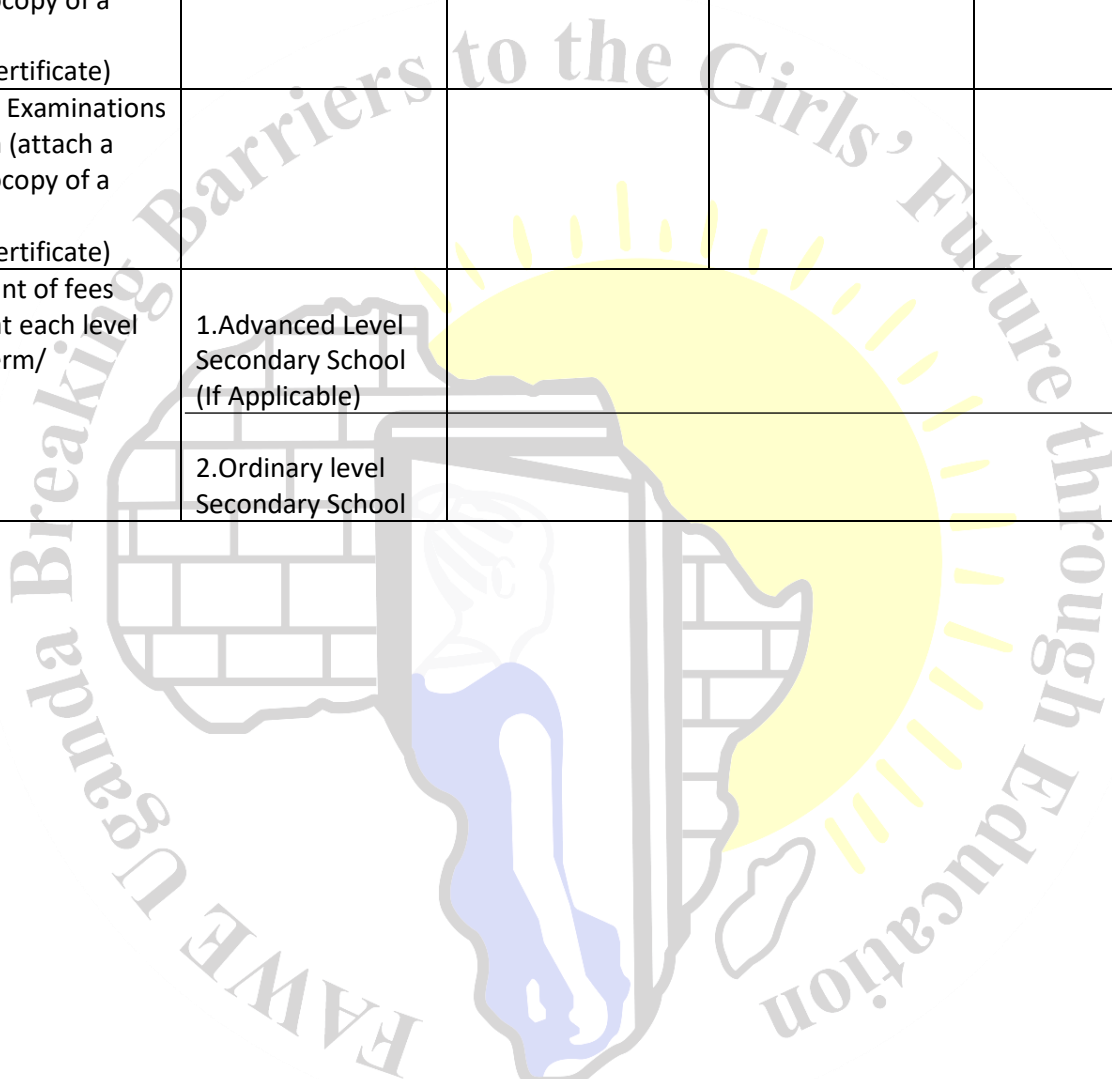
SECTION C. SCHOOL CONTACT INFORMATION

Name of former School where applicant sat UACE or UCE	
School contact /reference person	



SECTION D. ACADEMIC INFORMATION

Examination taken	Year of undertaking this Examination	Name of the school and district where the school is located	Type of school (Government or Private)	Overall score/ Aggregate, Grade or Points
UACE (attach a photocopy of a result slip/certificate)				
UCE (attach a photocopy of a result slip/certificate)				
Other Examinations Taken (attach a photocopy of a result slip/certificate)				
Amount of fees paid at each level per term/	1.Advanced Level Secondary School (If Applicable)			
	2.Ordinary level Secondary School			





SECTION E. SOCIO-ECONOMIC BACKGROUND (At the time of application).

Who do you live with?	<input type="checkbox"/> With Both Parents <input type="checkbox"/> With Father Only <input type="checkbox"/> With Non-Relatives	<input type="checkbox"/> With Mother Only <input type="checkbox"/> With Relatives <input type="checkbox"/> Alone
Who is the head of the household where you stay? Example Answer: father, mother, brother, sister, grandmother, myself, etc.)		
What is the occupation of this head of household? This could be Father, Mother or Guardian. Example Answer: Self-employed, employee, peasant farmer, casual laborer, etc.		
What is the total monthly income of your head of household? .		
Is your father alive?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, what is your father's age?		
What is your father's occupation?		
Is your mother alive?	<input type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, what is your mother's age?		
What is your mother's occupation?		
Who has been paying your school fees? Please give details.		
Do any of your parents or your household head live with disability or chronic illness? <input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please describe the kind of disability or chronic illness	
What is the total number of people in the household?		
What is the number of people above the age of 18 years in your household?		
How many of your siblings are above 18 years?		
How many of your siblings are below 18 years in home?		
What is the ownership status of the house you currently live in? (Is it a private house, rented from other people, temporary shelter?)		
What source of power does the household have for lighting and cooking? (Electricity, solar, firewood)		
If your house is rented, what is the monthly payment?		
What is the source of water for domestic use like drinking, cooking, washing?		



(Borehole, well, river, swamp, rain water, piped water, etc.)	
Are you receiving any kind of scholarship or any other support from other institutions? If yes, describe the support you get. If not, ignore this question.	

SECTION F. LEADERSHIP EXPERIENCE

Describe previously held leadership positions, Activities, or experiences: (i.e. Positions were the applicant has guided or led a group of people, a project, or a cause)	
State any award received from your previous Schools or community for any outstanding leadership performance.	

SECTION G. PARTICIPATION IN EXTRA CURRICULAR ACTIVITIES:

- Sports
- Religious Groups
- School Clubs
- Community Services
- Local Organizations
- Peer-to-peer groups
- Other (Explain)



SECTION H. COMMUNITY SERVICE EXPERIENCE

Have you been involved in any voluntary work in your community? If yes, please describe.	
How do you think your voluntary work contributed to the community?	
With your voluntary experience, please describe your aspirations for social change and how you plan to use your career to contribute to social change in your own community.	

Do you have any form of disability?	<input type="checkbox"/> YES <input type="checkbox"/> NO
If yes, what form of disability?	
What career do you plan to pursue? <input type="checkbox"/> Medicine <input type="checkbox"/> Humanitarian <input type="checkbox"/> Relief worker <input type="checkbox"/> Entrepreneur <input type="checkbox"/> Other (specify).....	How did you hear about this Bursary Program? <input type="checkbox"/> Radio <input type="checkbox"/> Newspaper <input type="checkbox"/> Poster <input type="checkbox"/> Former beneficiaries <input type="checkbox"/> FAWE Staff <input type="checkbox"/> Friend <input type="checkbox"/> Other specify.....

SECTION I: Application to Learning Institutions

Have you already applied for a course in any of the partner's institution of; Busitema University, Mbarara University of Science and Technology, and Gulu University, Uganda Technical College - Elgon, Medical Laboratory Technology training School and Jinja School of Nursing and Midwifery

YES NO

If yes, state the course you have applied for?

- Certificate in Nursing and Midwifery
- Certificate in Medical Laboratory Technology
- Diploma in Water Engineering
- Diploma in Civil Engineering
- Diploma in Electrical Engineering
- Bachelor of Degree only 3- 4-year courses; Please tick which course you have applied for in the bracket (Engineering, Agricultural Sciences, Medical Courses, Education Science Courses)

Please attach admission letter if available or indicate here the name of institution you have applied to and course you have applied for.

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SHORT ESSAY QUESTIONS.

These questions help us know you more as a person. Please take time to answer them carefully, honestly, and completely (Kindly feel free to use additional paper to provide more information if need be in case the spaces provided are not enough)

1. State your reasons for applying for the Forberg scholarship at FAWE Uganda. Also describe any specific reasons that will help the bursary technical committee to better understand your need for this bursary Program.

What are your future career aspirations? Why and how do you plan to achieve this?

2. Community give back is an important aspect of FAWE Uganda Higher Education scholarship Program.

How do you think your community will benefit from you during and after your studies?



DECLARATION:

I _____, certify that all of the answers, I have given in this application are complete and accurate to the best of my knowledge and, if admitted, I agree to observe all the terms and conditions of the Bursary Program. Failure to do so can result in disciplinary action. I agree that all documents submitted as part of this application must be authentic and that any falsification of admission and/or academic records through omission or misrepresentation by me in this application may result in the cancellation of my bursary and/or other disciplinary action by FAWE Uganda.

Furthermore, I understand that this information and my personal records may be reported to FAWE Uganda and used for evaluation and other program purposes. All information will be kept in strict confidence and will not be released in any way that would permit individual identification. I authorize release and use of this information, as described above, to FAWE Uganda.

Applicant Signature: _____ Date: _____

Parent/ Guardian: Signature: _____ Date: _____

Name _____

Recommendation by Area LC I Chairperson:

LC I Chairperson: Name: _____

Signature: _____ Date: _____

Official Stamp: _____

This section is for section for Technical Selection Committee (RTBC)

Administered by: (full name) _____

Signature: _____ Date: _____