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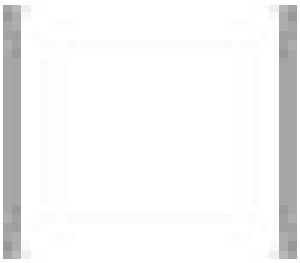
Passport photo



APPLICATION FORM FOR BURSARY: HIGHER EDUCATION ACCESS CERTIFICATE (HEAC) FOR ACADEMIC YEAR 2026/2027 WITH FAWE UGANDA

Forum for African Women Educationalists (FAWE) has partnered with the Mastercard Foundation to implement the FAWE and Mastercard Foundation Program.

There are 400 bursaries (80% female and 20% male) for program participants interested in pursuing Science, Technology, Engineering and Mathematics (STEM) related University programmes upon successful completion of the Higher Education Access certificate (HEAC) program. The program participants admitted and supported into the HEAC program will also be supported to pursue degree programs at the partner Universities upon successful completion of the 1-year HEAC program.

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Eligibility Criteria for TVET Bursaries at FAWE Uganda

- Underrepresented youth aged 18-25 years for Uganda nationals and 18-30 years for refugees
- Applicants must have completed Senior Six in the years 2022, 2023,2024 and 2025.
- The applicant should be applying for admission on the Higher Education Access Certificate program in STEM courses at any of the partner universities for the academic year 2025/2026.
- Must have been born in, and is a resident of any of the following target districts; Abim, Adjumani, Agago, Amolatar, Amudat, Amuria, Amuru,Alebtong, Bududa, Bukwo, Bulambuli, Bulisa, Bundibugyo, Buyende, Gulu, Ibanda, Isingiro, Kaabong, Kabale, Kaberamaido, Kagadi, Kalangala, Kalungu, Kampala, Kamwenge, Kanungu, Kapelebyong, Karenga, Kasanda, Kasese, Katakwii, Kikuube, Kiryandongo, Koboko, Kole, Kotido, Kween, Kyegegwa, Lamwo, Lira, Luuka,Madi Okollo, Manafwa, Mayuge, Moroto, Moyo, Mubende, Mukono, Nabilatuk, Nakapiripirit, Namayingo, Napak, Nebbi, Ntoroko, Nwoya, Obongi, Otuke, Pader, Pakwach, Palisa, Rubirizi, Terego, Tororo, Wakiso, and Yumbe.
- The applicant must not be a current beneficiary of any other bursary or scholarship scheme
- Applicants living with special needs, refugees, HIV/AIDS–infected or affected, and orphaned (total or partial) are encouraged to apply.
- Applicants for the HEAC must commit to completing a one-year ridging / HEAC program before being sponsored for a university degree
- The Applicant must be willing to give back to his/her community through development services

Only Applicants who have been admitted to the partner institutions and come from the program districts mentioned above, will be 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.

T**he deadline for applications is Friday 8th May 2026** after which no applications will be accepted.

For further clarification and guidance on the application process, kindly call the following numbers

1. Western Uganda (Ankole, Tooro, Rwenzori and Bunyoro) 0760398053

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2. Northern Uganda (West Nile, Acholi and Lango) 0760396661
3. Eastern Uganda (Karamoja, Teso, Bukedi, Bugisu, Sebei and Busoga) 0760397035
4. Central Uganda (Buganda) 0760396427

NB: Kindly note that calls will be received between 8am and 5pm only on working days (Monday – Friday).

PLEASE NOTE: *Application forms are free of charge and* ***NO fees****/ facilitation or intermediaries required at any stage of the selection process.*

I, _____, hereby provide my consent /assent to FAWE Uganda to process the personal information in this application form for the purpose to determine my eligibility for the bursary.

SECTION A. APPLICANTS PERSONAL INFORMATION

Date of Birth (DD/ MM/YYYY) (attach copy of birth certificate)	...../...../.....		Age:	Sex:	Male ☐ Female ☐
Surname (Family Name):		First (Given) Name:		Another name (if any)	
Place of birth	Village	Parish	Subcounty/ Div./ Municipality	District	
Current contact address					
Specify under which category you are applying ***(Tick only One Category)***					
☐ Refugee	Refugee Identification Number:				
☐ Internally Displaced Person (IDP)					
☐ Refugee hosting community	☐ Refugee settlement/camp within vicinity:				
Other underrepresented youth (Ugandan) ☐					
Current contact address for national applicants.	District of Residence:	Sub county:		Village:	

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Current Contact Address for Refugee Applicants	Country of Origin:		Hosting Country:	
	Name of Settlement		Local Administrative unit/ District	
Do you have any form of disability:	☐ Yes	☐ No		

If yes, what is the form of disability and what support do you require?

……
……
……
……
……

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

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FORUM FOR AFRICAN WOMEN EDUCATIONALISTS
UGANDA CHAPTER

SECTION B. APPLICANT'S CONTACT INFORMATION

Applicant's Contact	
Applicant's email address	
Parent/Guardian's Name:	
(active telephone number/email).	
Alternative contact person in addition to contact to parent/guardian who is likely to know how to reach the applicant in future	
Relationship to the Applicant	
Physical Address:	
Contact phone number/s	

SECTION C. SCHOOL CONTACT INFORMATION

Name of former A-level school	
School Address	
School telephone contact	
School email address	
Brief description of location of the school	

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SECTION D. ACADEMIC INFORMATION

Examination taken	Year of 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 result slip/certificate and Identity Card).				
UCE (attach a photocopy of a result slip/certificate).				
PLE (attach photocopy of result slip/certificate).				
Other examinations taken (Attach a photocopy of result Slip/certificate).				
Amount of fees paid at each level per year	Advanced level- Secondary school	UGX:		
	Ordinary level- Secondary school	UGX:		

		Subject	Grade obtained	Points obtained
Indicate the subjects you took at A-level and the grades obtained at each for Diploma Applicants	1.			
	2.			
	3.			
	4.			
	5.	**General paper**		
		Total Number of points		

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SECTION E. PARTICIPATING IN EXTRA CURRICULAR ACTIVITIES

☐ Sports and games

☐ School clubs

☐ Music and drama

☐ Other_____

If you have been a member of a team, club, organization, or association, specify your role:

- ☐ Chair
- ☐ Member
- ☐ Vice chairperson
- ☐ Secretary
- ☐ Founder
- ☐ Other (Explain)

.....

.....

SECTION F. SOCIO- ECONOMIC BACKGROUND (at the time of application)

Who do you live with?	
☐ Father only ☐ Mother only ☐ With both parents ☐ Other relatives/guardian	
☐ Father Alive ☐ Mother Alive ☐ Both parents alive ☐ Both parents deceased ☐ Father deceased ☐ Mother deceased	Father's age: ..... Mother's age: .....
Who is the head of the household where you live?	
☐ Self ☐ Mother ☐ Father ☐ Grandmother/Father ☐ Other relatives/guardian	
What is the highest level of education of the head of household?	

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☐ University graduate ☐ A' level Certificate ☐ O' Level Certificate ☐ Diploma/Certificate level ☐ Never attended school ☐ Primary level
What is the occupation of this head of household?
☐ Self-employed ☐ Employee ☐ Peasant farmer ☐ Commercial farmer ☐ Unemployed ☐ Retired ☐ Casual Laborer ☐ Business/Entrepreneur

What is the monthly average income of your household head?	UGX:
What is the average monthly contribution from house rent, pension, remittance, etc?	UGX

What is your mother's occupation? .....
Who has been paying your school fees? ☐ Self ☐ Father ☐ Mother ☐ Grandmother ☐ other relatives ☐ ponsors/donor Organizations
Please give details:

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Do any of your parents or your household head live with disability or chronic illness?
☐ YES
☐ NO
If yes, please specify
.....
.....
.....
.....

SECTION G. LEADERSHIP EXPERIENCE.

Describe previously held leadership positions, activities, or experiences: (i.e. Positions where 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 or any outstanding leadership performance.	

SECTION H. Community Service Experience.

Have you been involved in any voluntary work in Your community?	☐ No ☐ Yes
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.	

Which sectors do you plan to impact through your career aspirations?

☐ Agriculture ☐ Social & Humanitarian services

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- ☐ Skilled Trades
- ☐ Small Business / Entrepreneurial
- ☐ Education
- ☐ Public Service / Government
- ☐ Health & Medical
- ☐ Information Technology
- ☐ Religious
- Other

If 'Other' please explain .....
.....
.....
.....
.....

What career do you plan to pursue?	How did you hear about this Bursary Program? TICK
☐ Medicine ☐ Humanitarian ☐ Relief worker ☐ Entrepreneur ☐ Teacher ☐ Other (specify).....	☐ Radio ☐ Newspaper ☐ Poster ☐ Mastercard Foundation staff ☐ FAWE Staff ☐ Friend ☐ Other specify.....

SECTION I: Application to TVET institution

Have you already applied for HEAC at any of the Partner Universities?

Yes ☐ No ☐

If yes, state the HEAC programme/course and name of the University you have applied to:.....
.....
.....

Please attach admission letter if already admitted at the University
.....
.....

SHORT ESSAY QUESTIONS

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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 to the FAWE and Mastercard Foundation program bursary and also describe any specific reasons that will help the bursary technical committee to consider your need for this opportunity. (Maximum 200 words)

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

.....

.....

.....

3. Community give back is an important aspect of the FAWE and Mastercard Foundation program. How do you think your community will benefit from you during and after your studies?

.....

.....

.....

.....

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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. 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 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 and Mastercard Foundation Program and used for evaluation and other program purposes. I authorize the release and use of this information, as described above, to the FAWE and Mastercard Foundation Program.

FAWE Uganda will ensure that, all information will be kept in strict confidence and will not be released in any way that would permit individual identification.

Applicant Signature: _____ Date: _____

Parent/Guardian Name: _____ Date: _____

Signature_____

Applicant Signature: _____Date: _____

Parent/Guardian Name: _____Date: _____Signature_____

Recommendation by Area LC I Chairperson:
.....
.....
.....
.....
.....

LC I Chairperson: Name: _____ Signature: _____ Date:_____

Official Stamp: _____

Phone contact_____ Designation_____ Email_____

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