



St. Augustine International University
"Moral Rearmament, Wealth Multiplication"
Office of the Academic Registrar

Thursday 24th August, 2017

Dear: MUTYABA JEREMIAH

REGISTRATION NO: 2017AG/MBChB/1076

ADMISSION FOR AUGUST INTAKE 2017/2018 YEAR 1 SEMESTER I

The Admissions Board has recommended to the University that you be admitted to our Executive Program leading to the award of **BACHELOR OF MEDICINE AND BACHELOR OF SURGERY** at St. Augustine International University (SAIU). You are placed in our top group of admitted students and we welcome you to SAIU. The main reason you should consider SAIU seriously is the strength of our faculty, facilities and program. We take pride both in the exceptional stature of SAIU faculty and the commitment to graduate education. Payment should strictly be made to account details A/C Name St. Augustine International University, A/C No. 02363504848976 DFCU BANK, Kampala – Uganda.

Program Duration: FIVE (5) Years

Reporting Date: Monday 14th AUGUST, 2017

Registration

This offer has been made on the basis of your application and attached copies of academic documents (qualifications). All original authentic documentation must be presented at the time of registration including original tuition fees bank pay in slip/EFT/RTGS, academic transcripts, recommendation letter from your former school, identification (ID, Passport or Driving Permit) and five recent passport-size photographs. Presentation of forged documents leads to automatic disqualification. You must pay the total tuition before the reporting date failure of which will automatically make you forfeit your place.

University Fees for the Semester

The tuition fees for the program in the academic year 2017/2018 are **United States Dollars Two thousand (\$2000)** per semester. In addition to the tuition fee, there is **functional fees of United States Dollars One hundred and fifty (\$150) per semester**. National Council for Higher Education fee is **UG SHS 20,000** per year, payable at any Stanbic Bank branch. All fees are payable in full before the beginning of each semester. The University is non-residential.

Congratulations upon your admission to St. Augustine International University. We look forward to you integrating into a new and vibrant intellectual community.

24 AUG 2017

Yours Sincerely



Dr. Annabella Habinka Basaza Ejiri
Academic Registrar

24 AUG 2017

Please note:

1. Fees paid are nonrefundable.
2. A certified translation must be provided for all documents in a language other than English
3. Misrepresentation, falsification of documents, impersonation or providing false or incomplete information whenever discovered, either at registration or afterwards, will lead to automatic cancellation of admission, revocation of award where applicable and prosecution in the Courts of Law.

Total Tuition fees, Functional fees and National Council for Higher Education fees must be paid before registration.



St. Augustine International University
"Moral Rearmament, Wealth Multiplication"
Office of the Academic Registrar

Tuesday 25th July, 2017

Dear MUTYABA JEREMIAH

REGISTRATION NO: 2017AG/MBChB/157

ADMISSION FOR AUGUST INTAKE 2017/2018 YEAR 1 SEMESTER I

The Admissions Board has recommended to the University that you be admitted to our Executive Program leading to the award of **BACHELOR OF MEDICINE AND BACHELOR OF SURGERY** at St. Augustine International University (SAIU). You are placed in our top group of admitted students and we welcome you to SAIU. The main reason you should consider SAIU seriously is the strength of our faculty, facilities and program. We take pride both in the exceptional stature of SAIU faculty and the commitment to graduate education. Payment should strictly be made to account details A/C Name St. Augustine International University, A/C No. 02363504848976 DFCU BANK, Kampala – Uganda.

Program Duration: FIVE (5) Years

Reporting Date: Monday 14th AUGUST, 2017

Registration


This offer has been made on the basis of your application and attached copies of academic documents (qualifications). All original authentic documentation must be presented at the time of registration including original tuition fees bank pay in slip/EFT/RTGS, academic transcripts, recommendation letter from your former school, identification (ID, Passport or Driving Permit) and five recent passport-size photographs. Presentation of forged documents leads to automatic disqualification. You must pay the total tuition before the reporting date failure of which will automatically make you forfeit your place.

University Fees for the Semester

The tuition fees for the program in the academic year 2017/2018 are **United States Dollars Two thousand (\$2000)** per semester. In addition to the tuition fee, there is **functional fees of United States Dollars One hundred and fifty (\$150)** per semester. National Council for Higher Education fee is **UG SHS 20,000** per year, payable at any Stanbic Bank branch. All fees are payable in full before the beginning of each semester. The University is non-residential. Congratulations upon your admission to St. Augustine International University. We look forward to you integrating into a new and vibrant intellectual community.

25 JUL 2017
[Signature]

Yours Sincerely


.....

Dr. Annabella Habinka Basaza Ejiri
Academic Registrar



Please note:

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2. A certified translation must be provided for all documents in a language other than English
3. Misrepresentation, falsification of documents, impersonation or providing false or incomplete information whenever discovered, either at registration or afterwards, will lead to automatic cancellation of admission, revocation of award where applicable and prosecution in the Courts of Law.

Total Tuition fees, Functional fees and National Council for Higher Education fees must be paid before registration.



St. Augustine International University
“Moral Rearmament, Wealth Multiplication”
Office of the Academic Registrar

Tuesday 27th June, 2017

Dear: MUTYABA JEREMIAH

RE: OFFER LETTER FOR AUGUST 2017 INTAKE IN YEAR 1 SEMESTER 1

On the basis of your application and attached copies of academic documents, the Admissions Board has recommended to the University that you be admitted to our Executive Programme leading to the award of **BACHELOR OF MEDICINE AND BACHELOR OF SURGERY** at St. Augustine International University (SAIU). You are placed in our top group of admitted students and we welcome you to SAIU. The main reason you should consider SAIU seriously is the strength of our faculty, facilities and programmes. We take pride both in the exceptional stature of SAIU faculty and the commitment to quality education. Vacancies for the offered programme are limited therefore you are requested to confirm your acceptance of this offer not later than **18th July, 2017** by payment of the tuition and functional fees. Due to limited vacancies on this programme you are advised to pay the above fees as soon as possible so that you can be issued with an admission letter while there are still vacancies on the August 2017 intake otherwise you will be placed on February 2018 intake. After fulfillment of the above condition, an official admission letter will be issued to you. Payment should strictly be made to account details A/C Name St. Augustine International University, A/C No. 02363504848976, Bank: DFCU Bank, Uganda. In case of bank-bank transfers, the swift code is DFCUUGKA.

The tuition fees for the program in the academic year 2017/2018 are **United States Dollars Two thousand (\$2000)** per semester, **functional fees of United States Dollars One hundred and fifty (\$150)** per semester. National Council for Higher Education fee is **UG SHS 20,000** per year payable at any Stanbic Bank branch. All fees are payable in full before the beginning of each semester. Please note that the University is non-residential.

Yours Faithfully

27 JUN 2017

Dr. Annabella Habinka Basaza Ejiri
Academic Registrar

ST.AUGUSTINE
INTERNATIONAL UNIVERSITY
"Moral Rearmament, Wealth Multiplication"



Plot 31, Bunga Hill, Ggaba Road
P.O.Box 88, Kampala, Uganda
+256 784 290 233, +256 752 552 557
contact@saiu.ac.ug web: www.saiu.ac.ug

SAIU VISION

To be recognized as a moral rearmament, job creation and innovation driven University.

SAIU MISSION

To pursue research, teaching, and learning of international distinctions, academically current, innovative and responsive to local and global community needs.

Applicant: Mutyaba Jeremiah

Mob: +256705743187

Email: MutyabaJeremiah@gmail.com

Former School: Hope Senior Sec Sch- Nakirebe

Signature: Mutyaba

ENROLLED PROGRAMME

MBChB

STUDENT COMMITMENTS

- To be part and work with SAIU team
- To pay tuition fees in advance of beginning the Semester
- To attend 100% of lectures in a semester
- To be present at SAIU campus during study time
- To advise SAIU in case of absence
- To participate in most SAIU activities
- To behave in a responsible way on and off campus

PERSONAL OBJECTIVE

To serve and grow SAIU in research, teaching and community engagement

College:

Medicine, Health and Life Sciences

Student Name: Mutyaba Jeremiah

Academic Year 2017/2018

Semester
Year 1 Semester 1

Date: 27/6/2017

Form No.

Invoice Number: 0106

Receipt No.

Application No.

Invoice to: Mutyaba Jeremiah

Programme: MBChB

Particulars	Amount (USD)	Amount Total (USD)
Tuition Fee		\$2000
SAIU Scholarship		
Functional Fees		\$150
Application Fee		
Other (s)		

Payment terms: \$2150

Immediate payment by money transfer ONLY to the account below.

{St. Augustine International University}

Account No: { 02363504848976 }

Bank: DFCU Bank – Uganda Swift code: DFCUUGKA

Your application has been processed on the basis of your academic documents presented. You are required to pay total tuition. You will be registered on presentation of the payment slip. Also pay UGX 20,000 per year for National Council for Higher Education in any Stanbic Bank branch.

Misrepresentation, Falsification of documents, impersonation or providing false or incomplete information whenever discovered, either at registration or afterwards, will lead to *automatic cancellation of admission*, Revocation of award where applicable & prosecution in the courts of law.

SIGNATURE

Dr. Annabella H. Ejiri +256 772 571 444 ar@saiu.ac.ug

Academic Registrar

SIGNED IN THE PRESENCE OF:

Prof. Luvina Arun +256 757 234 814 luvina700@gmail.com

DVC – Finance, Marketing & Administration

27 JUN 2017
STAMP

**KNOW ALL MEN BY THESE PRESENTS,
THIS IS A DEED OF ABSOLUTE PAYMENT OF TUITION**

0106



ST. AUGUSTINE INTERNATIONAL UNIVERSITY

Bunga Hill Main Campus, P.O. Box 26687, Kampala, Uganda
Mobile: +256 705 444 540, +256 784290233
Email: admissions@saiu.ac.ug, Website: www.saiu.ac.ug

Undergraduate Application Form 2017

Please write clearly in capital letters with blue/black ball pen

PERSONAL INFORMATION

Title (Dr/Mr/Ms/Mrs/Rev):		Last Name(s): JEREMIAH	
First Name: MUTYIABA		Date of Birth: (dd/mm/yyyy) 17 th /03/1996	
Gender: Male <input checked="" type="checkbox"/> Female <input type="checkbox"/>	Marital Status: Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Others (Specify below) <input type="checkbox"/>		
Passport / ID No. H551245/620	Nationality: UGANDAN	Country of Birth: UGANDA	
Country of Ordinary Residence: UGANDA	Occupation: STUDENT Religion: CHRISTIAN		



Permanent Home Address
(Physical Address)

NABUZINGA

Telephone No: 0705743187

Mobile No: 0705743187 / 0703420506

Email:

DETAILS OF PROGRAM(S) TO STUDY (To select a program, refer to www.saiu.ac.ug)

1st Choice: Bachelor of Medicine and Bachelor of Surgery

2nd Choice:

3rd Choice:

Please indicate how you heard about SAIU Programs

Website ☒

Newspaper ☐

Social media ☐

Friend ☐

Mode of fees payment

Per semester ☒

Per Year ☐

Entire program duration ☐

Proposed start date

January 2017 ☐

April 2017 ☐

August 2017 ☒

FOR OFFICIAL USE ONLY

School Decision

Application No.

Course

This completed form and all supporting documents should be sent to or delivered to the University via E-mail, Post or by Hand not later than December 30th, March 30th or July 30th respective of the intake of the year you are seeking admission.

Undergraduate Applications

Office of the Registrar

St Augustine International University

Bunga Hill Main Campus, P.O. Box 26687, Kampala, Uganda

Mobile: +256 705 444 540, +256 784290233

Email: admissions@saiu.ac.ug, ar@saiu.ac.ug, contact@saiu.ac.ug

For further information please visit www.saiu.ac.ug

PARENT/GUARDIAN INFORMATION

(Give details of Parents and Guardian where applicable)

Father

Is father living? ☐ Yes ☐ No (Date Deceased _____)

Name: _____

Nationality: _____

Occupation: _____

Telephone No:
Include Area/Country code

Mobile No:
Include Area/Country code

Email: _____

Mother

Is Mother living? ☐ Yes ☐ No (Date Deceased _____)

Name: _____

Nationality: _____

Occupation: _____

Telephone No:
Include Area/Country code

Mobile No:
Include Area/Country code

Email: _____

Guardian

Is Guardian living? ☒ Yes ☐ No (Date Deceased _____)

Name: WATOTO CHILD CARE MINISTRIES - C MR KAMAKYA GEOFFREY

Nationality: UGANDAN.

Occupation: TEACHER.

Telephone No:
Include Area/Country code +256 70 34 20506

Mobile No:
Include Area/Country code T25678 7253 085

Email: kamakya.geoffrey@gmail.com

PREVIOUS EDUCATION

SECONDARY SCHOOL LEAVING EXAMINATION

UGANDA ADVANCED CERTIFICATE OF EDUCATION (UACE) OR EQUIVALENT

Certified photocopies of results and certificates must be attached to this application form.

Examining Authority: <u>UGANDA NATIONAL BOARD OF EXAMINATION BOARD (UNEAB)</u>	
Name and Address of School: <u>HOPE SENIOR SCHOOL, NAKIREBE</u>	
Year of Examination: <u>2016</u>	Index No. <u>U1984/515</u>

Subjects Include whether Principal (P) or Subsidiary (S)	Results/Grade						Overall Grade
	Papers						
	1	2	3	4	5	6	
CHEMISTRY (P)	5	3	3				C
BIOLOGY (P)	3	5	3				C
FOODS & NUTRITION (P)	1	1	1				A

ORDINARY LEVEL EXAMINATION

UGANDA CERTIFICATE OF EDUCATION (UCE) OR EQUIVALENT

Certified photocopies of results and certificates must be attached to this application form.

Examining Authority: <u>UGANDA NATIONAL EXAMINATION BOARD (UNEAB)</u>	
Name and Address of School: <u>HOPE SENIOR SCHOOL, BBIRA</u>	
Year of Examination: <u>2014</u>	Index No. <u>U3134/013</u>

Subjects <small>Provide Grade/Marks (not pass, credit, distinction) If a subject is not listed, include it in the spaces provided</small>					
Subject	Grade	Subject	Grade	Subject	Grade
ACCOUNTING		ENGLISH LITERATURE		MUSIC	
AGRICULTURE		FINE ART		PHYSICS	3
BIOLOGY	3	FRENCH		RELIGIOUS EDUCATION	1
CHEMISTRY	2	GEOGRAPHY	4	TECHNICAL DRAWING	
COMMERCE	2	HISTORY	1	FOODS & NUTRITION	1
ENGLISH LANGUAGE	2	MATHEMATICS	4		

ANY OTHER ACADEMIC QUALIFICATIONS

Certified photocopies of results and certificates must be attached to this application form.

University / Institute / College <small>(Include address and Country)</small>	Qualifications Obtained <small>(If any)</small>	Date Obtained	FullTime / Part Time / Distance

PERSONAL STATEMENT

Please provide a short statement indicating why you wish to undertake this Program (your first preference)

I wish to undertake this program because of the need the improvement of the health sector in Uganda. I would like to be the person who will bring awareness and sensitization to the community about the disease that are affecting people in the country. I will study hard to see that I bring about that change.

REFERENCES

Please provide the name of a person who is aware of your academic or professional ability and can support your application by providing a reference. (N.B: Referee should not be related to you in anyway).

Name of Referee	Mr KAMUKYA GEOFREY		
Physical Address	NAKIREBE		
Address	P.O BOX 26366	Postcode	—
City / Town	KAMPALA	Telephone No	070 34 20506 / 078725385
Mobile No:	070 34 20506	Fax	—
Country	UGANDA	Email	MutyabaJeremiah@gmail.com

DECLARATION

- a) I certify that the information provided, the statements made by myself and documents attached, are to the best of my knowledge, true and accurate.
- b) I hereby agree, if admitted as a student at St Augustine International University to observe and comply with all the rules and regulations, procedures and guidelines.
- c) I agree to St Augustine International University processing my personal data contained in this form, as well as other personal data the University may obtain from me, or from other people connected to my studies. I agree to the retention and disclosure of such data for normal academic and administrative purposes.

Applicant's Signature

Date:

Mutyaba Jeremiah

26th / 06 / 2017

A 2122608



NOV/DEC 2016 U.A.C.E.

EXAMINATION FOR THE UGANDA ADVANCED CERTIFICATE OF EDUCATION

MUTYABA JEREMIAH
HOPE SENIOR SCHOOL, NAKIREBE
ENTRY CODE: 5

U1984/515

DATE OF BIRTH: 17/03/1996

Please see overleaf

GENERAL PAPER
MATHEMATICS (SUB)
CHEMISTRY
BIOLOGY
FOODS & NUTRITION

SUBSIDIARY PASS
SUBSIDIARY PASS
PRINCIPAL PASS
PRINCIPAL PASS
PRINCIPAL PASS

Subject Grades	Paper Grades					
	1	2	3	4	5	6
3						
4						
C	5	3	3			
C	3	5	3			
A	1	1	1			

*** U.A.C.E. RESULT 5 ***

O 3961674



2014 U.C.E.

EXAMINATION FOR THE UGANDA CERTIFICATE OF EDUCATION

MUTYABA JEREMIAH
HOPE SENIOR SCHOOL, BIRA

(AGE 19)

U3134/013 ENTRY CODE 1
P.O. BOX 26366 MAKISO

1	ENGLISH	2	(TWO)
2	CHRISTIAN RELIG ED	1	(ONE)
3	HISTORY	1	(ONE)
4	GEOGRAPHY	4	(FOUR)
5	MATHEMATICS	4	(FOUR)
6	PHYSICS	3	(THREE)
7	CHEMISTRY	2	(TWO)
8	BIOLOGY	3	(THREE)
	FOODS & NUTRITION	1	(ONE)
	COMMERCE	2	(TWO)

GRADE AGGREGATE 15

*** RESULT 1 ***

Please see overleaf

Name :

MUTYABA JEREMIAH

Index No : U1984/515

Exam Year : 2016

Gender : M

Entry Code : 5

Age : 20

Result Code : 5

Uganda Advanced Certificate of Education

HOPE SENIOR SCHOOL, NAKIREBE

HOPE SENIOR SCHOOL, NAKIREBE

Print Date : 21/02/2017 15:46:14



Subject	Result
GEP	3
SMA	4
CHE	C
BIO	C
FDN	A

NOTE :

These are provisional results, for any
errors must be reported to the
respective school

Contact

uneb@uneb.ac.ug

Result Code : 5