

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

Thursday 24th August, 2017

Dear: MUGABI DANIEL

REGISTRATION NO: 2017AG/MBChB/1066

ADMISSION FOR AUGUST INTAKE 2017/2018 YEAR 1 SEMESTER I

PARTIAL KING CEASOR DEVELOPMENT KINGDOM SCHOLARSHIP

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 under the King Ceasor Development Kingdom Scholarship in the academic year 2017/2018 are United States Dollars Five Hundred (\$500) 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 Adding to ours Sincerely

Dr. Annabella Habinka Basaza Ejiri

Academic Registrar

Please note:

2. A certified translation must be provided for all documents in a language other 1. Fees paid are nonrefundable.

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.



LUBAGA HOSPITAL

P.O. Box 14130, Kampala, Uganda Tel: +256-414-270203/4, 0204-234800 E-mail:info@lubagahospital.org

Our Ref.:UMHL/OMD/STD.2017

January 24, 2018

Dickson: Let the student attend the Lectures but he nust pay functional fees.

The Chairman,
Board of Trustees
St. Augustine University
KAMPALA

THRU: The Vice Chancellor

St. Augustine University

KAMPALA

Dear Sir/Madam

SCHOOL FEES SETTLEMENT FOR MR. MUGABI DANIEL - MBchB1

Greetings from Lubaga Hospital.

I write to you concerning the above matter. The above-mentioned Student at the University who is our Employee was recommended for the Scholarship from St. Augustine University.

However, the terms are up to now not clear to the Hospital.

We request the following:

1. That he is allowed to continue attending Lectures as this is settled.

2. That preferably a full Scholarship is given to the Student since the means of payment from the Student and the Hospital are not readily available.

The Hospital is committed to continue supporting him with scholastic materials.

We await your positive response,

I remain

Yours faithfully DICAL DIRECTOR

Rabaga Hospital P.O. Box 14130.Kampala

Dr. Kibuuka Poter Tel: 0414 270203/4

MEDICAL DIRECTOR

KP/en

ST.AUGUSTINE

'INTERNATIONAL UNIVERSITY

"Moral Rearmament, Wealth Multiplication"

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.

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Name: Daniel Mugabi

Mob:

Email:

Year: One Semester: Two

Signature:

ENROLLED PROGRAMME мвснв

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

ehave in a responsible way on and off campus

PERSONAL OBJECTIVE

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



Plot 31, Bunga Hill, Ggaba Road P.o.Box 88, Kampala, Uganda +256 784 290 233, +256752 552 557 contact@saiu.ac.ug web: www.saiu.ac.ug

College: Medicine, Health and Life Sciences

Student Name: Daniel Mugabi

	Daniel Mugabi	Year 1 S	emester 2
Academic Year :	2018/2019	Form No.	
Date:	12/02/2018	Receipt	
Invoice Number:	105	No.	
Application No.			
Invoice to:	Daniel Mugabi		
Programme:	MBChB		Amount
	Particulars	Amount (USD)	Total (USD)
	Tuition Fee		
		\$250.00	\$250.00
	Functional Fees	32000	
	Application fees	-	
	Other (s)		
-	PAID		\$250.00
Payment terms:	Total nt by money transfer ONL)		

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 issued with an admission letter and 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.

Flat nka SIGNATURE

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

Academic Registrar

SIGNED IN THE PRESENCE OF: ...

Mr. Dickson Bikorwa +256 772 571 312 dbikorwa@saju.ac.ug

Finance Officer

STAMP KNOW ALL MEN BY THESE PRESENTS, 2 FEB 2018 THIS IS A DEED OF ABSOLUTE PAYMENT OF TUITION



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

Monday 22nd January, 2018

Dear Mr. Mugabi Daniel

REGISTRATION NO: 2017AG/MBChB/1066

ADMISSION FOR AUGUST INTAKE 2017 YEAR 1 SEMESTER I

PARTIAL KING CEASOR DEVELOPMENT KINGDOM SCHOLARSHIP

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:

Saturday 13th January, 2018

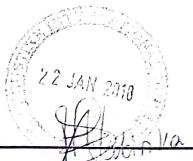
Registration

This admission 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 2018/2019 as per your scholarship are United States Dollars Two Hundred and Fifty (\$250) 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.



Yours Sincerely

Dr. Annabella Habinka Basaza Ejiri Academic Registrar

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

Thursday 24th August, 2017

Dear: MUGABI DANIEL

REGISTRATION NO: 2017AG/MBChB/1066

ADMISSION FOR AUGUST INTAKE 2017/2018 YEAR 1 SEMESTER I

PARTIAL KING CEASOR DEVELOPMENT KINGDOM SCHOLARSHIP

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-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 under the King Ceasor Development Kingdom Scholarship in the academic year 2017/2018 are United States Dollars Five Hundred (\$500) 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 Labinko Yours Sincerely

Dr. Annabella Habinka Basaza Ejiri **Academic Registrar**

Please note:

2. A certified translation must be provided for all documents in a language other

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"

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: Mugabi Daniel
Mob:+256 782 735 879

Email: mugabikats@gmail.com

Former School: School of Clinical Officers

Signature: (b)

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



Plot 31, Bunga Hill, Ggata Road
P.o.Box 88, Kampala, Uganda
+256 784 290 233, +256 752 552 557
contact @sainacug web www.sainacug

C. Hagat	I ifa	Sciences	
College: Med	icine, Health and Life	Boton	
Student Name:	Mugabi Daniel	T C	-
		Semester	Semester 1
Academic Year	2017/2018	Form No.	
Date:	24/7/2017	Receipt	
Invoice Number:	0156	No.	
Application No.			
Invoice to:	Mugabi Daniel		
Programme:	B. medicine and Su	Amount	Amount Total (USD)
	Particulars	(USD)	1001(030)
	Tuition Fee		
	SAIU Scholarship		\$500
	Functional Fees		
	Application Fee		
	Other (s)		
Payment terms:	Total	the account	\$500 below.
Immediate paymen	t by money transfer ONLY	moital	
{St. Augustine	International Unive	rsity;	
(naak3504X4XY/0 } ⊥		
Bank: DFCU Ban	k – Uganda Swift code:		

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 Stanbie 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 <u>ar@saiu.ac.ug</u>

Academic Registrar

SIGNED IN THE PRESENCE OF:

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

DVC - Finance, Marketing & Administration

24 JUL 2017

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



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

Monday 24th July, 2017

Dear MUGABI DANIEL

Interr

The

RE: OFFER LETTER FOR AUGUST 2017 INTAKE UNDER THE KING CEASOR KINGDOM SCHOLARSHIP 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 have been offered a partial King Ceasor Kingdom Scholarship on the recommendation of the medical director of Lubaga hospital, Dr. Kibuuka Peter. 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 3rd AUGUST, 2017 by payment of the tuition. 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. The academic year starts on 14th August, 2017. 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 Five Hundred (\$500) 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

2 4 JUL 2017

Dr. Annabella Habinka Basaza Ejiri

Academic Registrar

Dr. Annabella Habinka Ejiri, Academic Registrar, St. Augustine International University, Plot 31 Bunga Hill, P.O Box 88 Kampala, Uganda; Tel: +256 (0) 752 552 557, +256 (0) 772 571 444 Email: ar@saiu.ac.ug Web: http://www.saiu.ac.ug

CASH DEPOSIT/WITHDRAWAL/INTERNA	AL FUNDS TRANSFER/DEM	IAND DRAF	TS SL	IP	Standard Chartered
Please tiok applicable option	(66) (103)				
Cash Deposit Cash Withdrawal Funds Transfer	Demand Drafts Requisition	CURREN	CY		USD GBP EUR KES
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Internal Funds Transfer Instructions: Please transfer the unc	ler mentioned amount to:	Notes/Coins			(FX 6)
Account manage USD 81-030-144812-00 57	AUGUSTINE INTERNATIONAL UNIVE	Notes/Coins			/ /// /
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Details - CASH DEPOSIT		Notes/Coins			(000)
Amount in figures MUGABI DANIEL Amount	n words Lto	Notes	20		
Transaction Reference : 00003 154/951 0006	All Policy	Notes	10		
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Issue Demand Draft Currency Amount in	igures All	Notes	1		8/
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Customer's Transaction Approval	THE CHARLE CHARLES M. B.C.	NB T	, ० ५	(
Transacted by (Full Names) McCnPs (B	ID. NO	Mobile	e Numbe	er D)(1) EF EF G T(
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For Bank Use Only					
The Bank's machine validation will constitute ackn	owledgement of receipt of depo	∎ esit/ payment.			
"The deposits and their payment shall be governed made to a customers' account held with Standard (foreign or local currency) only from us unless oth accordance with the conditions we may impose."	Chartered Bank Uganda Limite	d (us), a custo	omer wi	ill req	uest a withdrawal
MUGABI Do	ANIEL	С	hecked	Ву: _	

"Standard Chartered Bank Uganda Limited is regulated by Bank of Uganda."

Approved By:

y .	
	_
This box for University use only	

Undergraduate 7



Bunga Hill Main Campus, P.O Box 26687, Kampala, Uganda Mobile 1250 705 444 540, 1256 312 516 789 Email: admission@saiu.ac.ug, Website www.saiu.ac.ug

	O - GAG			
Direct	Entry Application	Form	2016/2	017
Direct	Entry Application	Form	2016/2	:01

Please write clearly in capital letters with blue/black ball pen	
PERSONAL INFORMATION Title (Dr/Mr/Ms/Mrs/Rev): First Name: Much Status:	MIEC-K. (dd/mm/yyyy) 11986.
Passport / ID No. OO / 3 5 5 9 0 0 Nationality: Country of Ordinary Residence: Country of Ordinary Residence: Occupation:	untry of Birth: UGANIAN CALCUNIAN THE COR
Permanent Home Address (Physical Address) NAKULOBY E-VID P-0 BOX LY02	S. J. M. Car.
Telephone No: Mobile No: 0782735879 Email: Mugaloillatt@yold DETAILS OF PROGRAM(S) TO STUDY (To select a program, refe	0752-735879 209m-n-com'
DETAILS OF FROOIVIMO	ENE & BACHELOR Of EURGERY.
Please indicate how you heard about SAIU Programs Website Mode of fees payment Per semester Per Year	Newspaper Social media Friend Entire program duration
Proposed start date August 2016 January 2016	FOR OFFICIAL USE ONLY
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 June 30th of the year you are seeking admission.	School Decision
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,+256 312 516 789	Application No.
Email: admission@saiu.ac.ug For further information please visit www.saiu.ac.ug	Course

PARENT/GUARDIAN INFORMATION
(Give details of Parents and Guardian where applicable)
Eather
Is father living? Yes PNO (Date Deceased 30/11/1999) Name: LATE KATUROMU DETAIS Nationality: UGMADOME Occupation: - B/MAN
Name: LATE KATURAMU ATTAIS
Nationality: CIGNTO DITTO
Occupation: - B/mnn.
Telephone No: Include Area/Country code
Mobile No: Include Area/Country code
Email:
Mother Is Mother living? Yes No (Date Deceased 27/3/2007) dd/mm/yyyy
Name: X/AZIALE ANNET
Name: MAXINELE ANNET Nationality: UG MY DMY Occupation: BUSSINESS WEMPTY
Occupation: Bussiness wom took
Telephone No: Include Area/Country code
Mobile No: Include Area/Country code
Email:
Guardian
Is Guardian living? Yes No (Date Deceased dd/mn/yyyy)
Name: MUCBUSA VICENTY.
Nationality: UCMTODATI' Occupation: BUSSINESS MATT'
Occupation: BUSSINESS MATT
Telephone No: Include Area/Country code 0772404886 0701404885°
Mobile No: Include Area/Country code
Email:

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.

results and certificates must be attached	to this application form.	
Examining Authority: UNEB		
Name and Address of School: CALTEC ACAD CVN.	y marestore.	
Year of Examilnation: 2004.	Index No. U0178/525.	
Subjects	Results/Grade	Sudantes S

Subjects	Resu	lts/Gra	de				
Include whether Principal (P) or Subsidiary (S)	Papers				Overall Grade		
CENERAL MORR	1	2	3	4	5	6	5
MATHEMATICS CSUB)							6
DHYSICS	8	6	4	-			<u> </u>
CHEMISTRY.	5	4	2	-			<u> </u>
Blococy.		7		,			

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:	UNEB.	
Name and Address of Schoo	POPOX 8114 KAMPACA.	
Year of Examiination:	D1 Index No. U1326[015.	

Subject	Grade	Subject	Grade	Subject	Grade
ACCOUNTING		ENGLISH LITERATURE		MUSIC	= =
AGRICULTURE		FINE ART		PHYSICS	5
BIOLOGY	6	FRENCH		RELIGIOUS EDUCATION	13
CHEMISTRY	3	GEOGRAPHY	4	TECHNICAL DRAWING	
COMMERCE	3	HISTORY	2		
ENGLISH LANGUAGE	5	MATHEMATICS	5		

ANY OTHER ACADEMIC QUALIFICATIONS

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

University / Institute / College (Include address and Country)	Qualifications Obtained (If any)	Date Obtained	FullTime / Part Time / Distance	
SCHOOL Of CLINICA	DIPLOMA			
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PERSONAL STATEMENT
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the constrains of loosing parent & doning
My Struggle
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Mostrotist & this will helpf with health
court from the above to be carried
profession de la company de la
Just be gratefo if my opplocation is put
1 males your consider aftight
REFERENCES
Please provide the name of a person who is aware of your academic or proffesional ability and can support your application by providing a reference. (N.B: Referee should not be related to you in anyway).
Name of Referee /UBACA HOSPIZATE (Dr KIBUCKA)
Physical Address 1 0 1 m 450 f 201 2012

D-0 BOX C4130

DECLARATION

Address

City / Town

Mobile No:

Country

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.

Postcode

Fax

Email

Telephone No

- 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 stignature	Date: 5/05/17

P.O. BOX 724, FORT

DANIEL

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23 'S BEETINES O							
A: PRELIMINA	QQ5.7/.Q6	ON,	20				
22 Stringer	THEORETICAL HOURS	PRACTICAL HOURS	PROGRESSIVE EXAMS	WRITTEN EXAMS	CLINICAL EXAMS	TOTAL (%)	GRADE
Health Education	42	58	22	20	37	79%	Distir
Nutrition	50	100	21	23	23	67%	Credit
Anatomy &	140	160	24	20	24	68%	Credi
Physiology							
Nursing .	115	115	17	19	23	59%	Pass
First Aid	40	20	18	19	19	55%	Pass
Psychology	60	20	20	18	19	56%	Pass
P.H.C	. 437	504	22	20	37	79%	Disti
B: INTERMIDIATE INDEX NO		ON	• • • • • • • • • • • • • • • • • • • •	20.07/08	3		
Ophthalmology	68	90	20	21	26	67%	Credi
Environmental Heal		72	19	20	20	59%	Pass
Pharmacology	80	96	21	20	24	65%	Credi
Dentistry	30	45	20	15	25	60%	Pass
Microbiology	62	60	20	23	20	63%	Pass
M.C.H /F/Planning	85	90	27	20	23	70%	Credi
Psychiatry	60	20	17	20	21	58%	Pass
g C: FINAL EXAMI	NATIONS	JU]	L¥)()/V	- g55
INDEX NO: FPL	.05.7/.09	•••••					
Medicine	126	124	20	20	2 2.	62%	Pass
Surgery	136	206	19	18	23	60%	Pass
Paediatrics	1.20	135	18	21	22	61%	Pass
Obs. & Gyn.	72	142	20	19	24	63%	
Public Health	37	504	18	18	23	5 <i>9</i> %	Pass
Medicine Surgery Paediatrics Obs. & Gyn. Public Health Research I.M.C.I I wish him/her success	82	68		10	رے	D 97º	Pass
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I wish him/her success	s in his/her subsec	juent a <u>cademi</u> c r	orofession and so	cial andôws	VY.		CPass

I wish him/her success in his/her subsequent academic profession and social endeavours.

Signed

PRINCIPAL TUTOR

AUG 2009

This result slip is not a certificate. The Uganda National Examinations Board reserves the right to correct the information given on results slips which will be confirmed by the issue of certificates. ተሪ የረ ቀ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ ነ

CHRISTIAN HISTORY GEOGRAPHY PHYSICS MATHEMATICS CHEMISTRY BIOLOGY COMMERCE RELIGIOUS EDUCATION

GRADE AGGREGATE 20

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RESULT

EXAMINATION FOR THE UGANDA CERTIFICATE OF EDUCATION P O BOX 8114, KAMPALA BRIGHTWAY HILL SCH, BUKESA

MUGABI DANIEL

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GENERAL PAPER

MATHEMATICS (SUB)

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MUGABI DANIEL

EXAMINATION FOR THE UGANDA ADVANCED CERTIFICATE OF EDUCATION

U0178 525

Subject Grade

4 Paper Grades

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** U.A.C.E.

RESULT Ü **

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SUBSIDIARY PASS

PRINCIPAL

PASS





INSTITUTE OF HOSPICE AND PALLIATIVE CARE IN AFRICA (IHPCA)

Certificate of Completion

This is to certify that

MUGABI. DANIEL. K

has successfully completed a five day training for health professionals in Palliative Care of Cancer and HIV/AIDS patients and their families. 28th November - 2nd December 2016

Prof. Wilson Acuda, Principal, IHPCA



LUBAGA HOSPITAL

P.O. Box 14130, Kampala, Uganda Tel: +256-414-270203/4, 0204-234800 E-mail:info@lubagahospital.org

Our Ref.:UMHL/HSFSTD.ST.MED-SURG/2017

July 21, 2017

The Chairman
Board of Trustees
Mr. Mulenga Augustus Caesar
St. Augustine International University
Bunga

THRU.: The Academic Registrar

St. Augustine International University

Bunga

Dear Sir

SELECTED STUDENT FOR SPONSORSHIP OF MBchB

I greet you in the name of our Lord Jesus Christ.

Following our discussion with you, offering Sponsorship, for one of our Employees for MBchB Course, the Hospital has gone through the process of evaluating and selecting a Student for the above.

We have chosen one of our outstanding Clinical Officers called Mugabi Daniel. He has been given an Offer Letter, herewith attached. This letter, is, therefore, intended to follow up on that issue.

We continue to appreciate the productive partnership with SAIU.

Yours faithfully

EDICAL DIRECTOR

Rubaga Hospital

P.O. Box 14130.Kampala

Tel: 0414 270203/4

MEDICAL DIRECTOR

Enc.

KP/en



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

Monday 7th August, 2017

MUGABI DANIEL Dear

REGISTRATION NO: 2017AG/MBChB/133

ADMISSION FOR AUGUST INTAKE 2017/2018 YEAR 1 SEMESTER I

PARTIAL KING CEASOR DEVELOPMENT KINGDOM SCHOLARSHIP

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

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 Five Hundred (\$500) 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.

Yours Sincerely

07 AUG 2017

ATESNICS

Dr. Annabella Habinka Basaza Ejiri Academic Registrar

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.



NGDOM SCHOLARSHIP

Date: .	1/	B	17		
Date				•••••	

Dear Sir/Madam

LETTER OF	OFFER FOR KING CEASOR KINGDOM SCHOLARSHIP
We write to offer	the King Ceasor Kingdom Scholarship
for the	
Bachelor of I	Medicine and Bachelor of Surgery
O Bachelor of C	Dil and Gas
O Bachelor of l at St. Augustine Inter	national University for a period of
Ofive years	
O three years	
The Kingdom schola	rship entails the following conditions. andes are expected to be maintained with a CGPA above 3.60 every
2 0	on of your studies you are expected to return to your respective rural

- 2. On completion of your studies you are expected to return to your respective rural district to serve at the district community health center for a period of 5 years.
- 3. To contribute 10% of your salary for 5 years to the King Ceasor Kingdom when you get a job as will be required to declare.
- 4. Oil and gas students may be secured jobs in the Middle East to work for various Oil and Gas companies.

ELIGIBILITY CRITERIA

To be offered this scholarship, the following requirements MUST be fulfilled in writing to the following address:

His Highness

King Ceasor Augustus Mulenga

Ceasar Development Kingdom

Chairman Board of Trustees

- 1. Letter of recommendation from the District Chairman (Local Council 5)
- 2. Letter of from parents / guardians
- 3. Letter of recommendation from former School/Institution
- 4. Letter of commitment from the rural district health center /Court offering place for internship and offer for work for at least 5 years after your graduation.

Upon acceptance of the KING CEASOR KINGDOM SCHOLARSHIP Signature of committement to the Kingdom Scholarship: Awardee: Muchos Britte. Student registration number: Home Address: D-OBOX 9181 Known mor Phone Numbers and email address: DTT2735879 Mvgds1Kots&gmin Vaporport Witness/ Next of Kins: Names: MWEBESA VINCENT Home Address: P.O. Box 9151 KAMPALA Phone numbers / email address: + 256772 Ho H556 muebosav @ yano. auk District: KABALE District Placement Guarantor: LIBUUKA 0782055 805 peterokibzo-jahovica Phone numbers / email address:

His Highness King Ceasor Augustus Mulenga Ceasar Development Kingdom Chairman Board of Trustees

Yours faithfully

MWEBESA VICENT

P.0.Box 9151

Kampala-Uganda

30th July 2017

HIS HIGHNESS

KING CEASOR AUGUSTUS MULENGA

CEASOR DEVELOPMENT KINGDOM

CHAIMAN BOARD OF TRUSTEES

Dear Sir.

RE: GUARDIAN/PARENT

This is to confirm to you that am the guardian/parent of Mugabi Daniel.

Am grateful for having admitted our son for Bachelor of Medicine and Bachelors surgery at St Augustine international University under the scholarship of King Ceasor Kingdom.

This will enable him fulfil his dream of becoming a medical doctor

Any assistance rendered to him will be highly appreciated.

Yours faithful

MWEBESA VICENT

Ziebeza

Tel-0772045564