



J19/136

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

Thursday 7th February, 2019

Dear Mr. Balas Tijjani Sani,

REGISTRATION NO: 2019J/MBChB/1036

ADMISSION FOR JANUARY INTAKE 2019 YEAR 2 SEMESTER 2

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.

Program Duration: FIVE (5) Years
Reporting Date: Monday 14th January, 2019

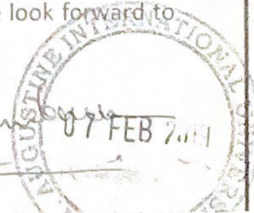
Registration

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 2019/2020 are United States Dollars Two thousand five hundred (\$2,500) per semester. Payment should strictly be made to account details A/C Name St. Augustine International University, A/C No. 02363504848976 DFCU BANK, Kampala – Uganda. All fees are payable in full before the beginning of each semester. National Council for Higher Education fee is UG SHS 20,000 per year, payable at any Stanbic Bank branch.

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


07 FEB 2019


JE/1/P/12

Yours Sincerely



Professor Nzarubara Gabriel
Vice Chancellor



Please note:

1. Fees paid are nonrefundable.
2. The University is non-residential.
3. A certified translation must be provided for all documents in a language other than English.
4. 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 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.

Name: **Balas Tijjani Sani**

Mob: 070537039

Email:

Year: Two Semester: Two

Signature:

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

have 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
+256772 571 444, +256755 444 540
contact@saui.ac.ug web: www.saiu.ac.ug

College: **Medicine, Health and Life Sciences**

Student Name: **Balas Tijjani Sani**

Academic Year : 2019/2020

Year 2 Semester 2

Date: 06/02/2019

Form No.

Invoice Number: SAIU19/157

Receipt No.

Application No.

Invoice to: **Balas Tijjani Sani**

Programme: **MBChB**

Particulars

Amount (USD)

Amount Total (USD)

Tuition Fees

\$2,500.00

Application fees

\$21.00

Other (s)

PAID

Payment terms:

Total

\$2,521.00

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.

SIGNATURE

Mrs. Luvina Arun +256 757 234 814 luvina700@gmail.com
DVC - Finance

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

ST. AUGUSTINE

INTERNATIONAL UNIVERSITY

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Name: **Balas Tijjani Sani**

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College: Medicine, Health and Life Sciences

Student Name: **Balas Tijjani Sani**

Academic Year : 2019/2020		Year 2 Semester 2	
Date:	06/02/2019	Form No.	
Invoice Number:	SAIU/19/157	Receipt No.	
Application No.			
Invoice to:	Balas Tijjani Sani		
Programme:	MBChB		
	Particulars	Amount (UGX)	Amount Total (USD)
	Tuition Fees	\$2,500.00	
	Application fees	\$21.00	
	Other (s)		
	PAID		
Payment terms:	Total		<u>\$2,521.00</u>

Immediate payment by money transfer ONLY to the account below.

{St. Augustine International University}

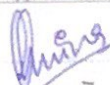
Account No: { 02363504848976 }

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SIGNATURE



Mrs. Luvina Arun +256 757 234 814 luvina700@gmail.com
DVC - Finance

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



Dear Prof. Marsh.

Requesting you to
advise on this admission

Prof. Sadig had sent
their results I am unable
to download as there is
no internet. Please assist

Amir

ST. AUGUSTINE INTERNATIONAL UNIVERSITY

Plot No. 88 Bunga Hill, Kampala, Uganda

STUDENT ADMISSION AND ELIGIBILITY STATUS

1	STUDENT NAME	BALAS TIJSANI SANI
2	COURSE APPLIED FOR	MBCHB 2.2
3	ACADEMIC YEAR AND INTAKE	2018/19
4	QUALIFICATION:	1. Transcript from KIU (1.1) 2. UCE equivalent NCEIO 3. 4. 5.
5	COMMENTS BY THE ADMISSIONS OFFICE	The student is yet to provide an up-to-date transcript from KIU. We seek clarity on whether he can join MBCHB
6	COMMENTS OF THE LEGAL OFFICER	
7	FINAL COMMENTS OF ELIGIBILITY	

Bunga Hill Main Campus P O Box 88 Kampala Uganda
Mobile +256 705 444 540 +256 784295233
Email admissions@sau.ac.ug Website www.sau.ac.ug

Undergraduate

Application Form 2018/2019, 2019 and 2019/2020 Academic Year

On Scholarship: Yes ☐ No ☐ If Yes, Scholarship Name:

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

PERSONAL INFORMATION

Title (Dr/Mr/Ms/Mrs/Rev)		Last Name(s): BALAS	
First Name: TIJJANI SANI		Date of Birth (dd/mm/yyyy): 06 OCT 1997	
Gender: Male ☒ Female ☐	Marital Status: Single ☒ Married ☐ Others (Specify) ☐		
Passport / ID No: A08105591		Nationality: NIGERIAN	Country of Birth: NIGERIA
Country of Ordinary Residence:		Occupation:	Religion: ISLAM

Permanent Home Address
(Physical Address)

Telephone No. _____

$$+ 256790076025$$

Mobile No:

+ 256 7053 70397

Email:

t.ijani@hmed18@gmail.com

Date of Application: _____

29/01/2019

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

1st Choice: MBChB (2.2)

2nd Choice: MBChB

3rd Choice:

Please indicate how you heard about SAU Programs

Website ☐ Newspaper ☐ Social media ☐ Friend ☒

Mode of fees payment

Per semester ☒ Per Year ☐ Entire program duration ☐

Proposed start date

January 2019 ☒ April 2019 ☐ August 2019 ☐

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 88, 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

FOR OFFICIAL USE ONLY

School Decision

Application No.

Course

28/1/17

PARENT/GUARDIAN INFORMATION

(Give details of Parents and Guardian where applicable)

Father	
Is father living? ☒ Yes ☐ No (Date Deceased _____)	
Name: AHMED SANI BALAS	
Nationality: NIGERIAN	
Occupation: CIVIL ENGINEER	
Telephone No: +2348036048 +2348036480391	
Mobile No: +2348036048 +2348036480391	
Email: sanibalas26@gmail.com	

Mother	
Is Mother living? ☒ Yes ☐ No (Date Deceased _____)	
Name: JAMILA SANI BALAS	
Nationality: NIGERIAN	
Occupation: TEACHER	
Telephone No: +2347032124881	
Mobile No: +2347032124881	
Email: Jamilahmed18@yahoo.com	

Guardian	
Is Guardian living? ☒ Yes ☐ No (Date Deceased _____)	
Name:	
Nationality: NIGERIAN	
Occupation: TEACHER CIVIL ENGINEER	
Telephone No:	
Mobile No:	
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.

Examining Authority:	
Name and Address of School:	
Year of Examination:	Index No.

Subjects Include whether Principal (P) or Subsidiary (S)	Results/Grade						Overall Grade
	Papers						
	1	2	3	4	5	6	

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:	NATIONAL EXAMINATIONS COUNCIL (NECO)
Name and Address of School:	PEN RESOURCE ACADEMY, LAFIYAWO GOMBI
Year of Examination:	2016
Index No.	60087348EA

Subjects Provide Grade/Marks (not pass, credit, distinction) if a subject is not listed, include it in the spaces provided					
Subject	Grade	Subject	Grade	Subject	Grade
ACCOUNTING		ENGLISH LITERATURE		MUSIC	
AGRICULTURE	C6	FINE ART		PHYSICS	C5
BIOLOGY	C5	FRENCH		RELIGIOUS EDUCATION	
CHEMISTRY	C5	GEOGRAPHY		TECHNICAL DRAWING	
COMMERCE		HISTORY		INFORMATION COMMUNICATIONS	C5
ENGLISH LANGUAGE	B3	MATHEMATICS	C5		

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
KAMPALA INTERNATIONAL UNIV	TRANSFER		

PERSONAL STATEMENT

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

Ever since was a child, my ambition was to become a medical doctor, so that can help those in need especially my society. Considering the fact that there are less medical practitioners from where I come from, make would study hard so that I can become one and help out the less privileged and the needy.

REFERENCES

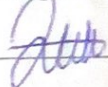
Please provide the name of a person who is aware of your academic or professional ability and can support your application by providing a reference. (N.B. Referee should not be related to you in anyway).

Name of Referee	JAMILA SANI BALAS		
Physical Address	GOMBE NIGERIA		
Address			Postcode
City / Town			Telephone No
Mobile No:	+2347032124881		Fax
Country	NIGERIA		Email Jamillahmed18@yahoo.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:

29 JAN 2019



KAMPALA
INTERNATIONAL
UNIVERSITY
WESTERN CAMPUS

PROVISIONAL RESULTS' SLIP

THE DIRECTORATE OF ACADEMIC AFFAIRS KIU-WC
P.O. BOX 71, Bushenyi - Uganda
Tel: +256-779-445-959/ +256-702-411-357
Email: admin@kiu_wc.ac.ug
Website: www.kiu.ac.ug

NAME: TIJANI SANI BALDS

SEX: MALE

NATIONALITY: NIGERIAN

PROGRAM: BACHELOR OF MEDICINE AND BACHELOR OF SURGERY

REGISTRATION NO: BMS/9387/172/DF

ENTRY MODE:

DATE OF ENTRY:

DATE OF BIRTH:

2016/2017		AUGUST		YEAR 1 SEM 0			
COURSE CODE COURSE TITLE		CU	CW	EYE	WV	TT	LG TP
MPP 101	Basics Of Computer Science	2	31	35	66	C+	3.5
MPP 104	Behavioral Sciences	2	31	39	70	B	4.0
MPP 110	Biology	2	23	32	55	D+	2.5
MPP 102	Biostatistics	2	27	36	63	C	3.0
MPP 113	Chemistry	2	31	49	80	A	5.0
MPP 100	Communication & Counseling Skills	2	25	25	50	D	2.0
MPP 114	Entrepreneurship	2	27	37	64	C	3.0
MPP 111	Mathematics	2	29	40	69	C+	3.5
MPP 112	Physics	2	32	38	70	B	4.0
MPP 106	Principles Of Community Health And Epidemiology	2	24	34	58	D+	2.5
MPP 105	Principles Of Ethics And Integrity	2	24	31	55	D+	2.5
MPP 103	Research Methodology	2	23	46	69	C+	3.5
GPA: 3.25							

2016/2017		DECEMBER		YEAR 1 SEM 1			
COURSE CODE COURSE TITLE		CU	CW	EYE	WV	TT	LG TP
BMS 1101	Human Anatomy I (Histology/Upper And Lower Limbs/Embryology)	4	18	32	50	D	2.0
BMS 1103	Introduction To Community & Community Diagnosis (Coberms) I	6	30	40	70	B	4.0
BMS 1104	Medical Biochemistry I (Fundamental Of Biochemistry)	2	24	39	63	C	3.0
BMS 1102	Medical Physiology I (Cell Biology/Excitable Tissues/Blood And Body Fluids/Cvs)	5	21	32	53	D	2.0
BMS 1105	Nursing Skills/Process	2	24	36	60	C	3.0
GPA: 2.84							

2017/2018				GPA: 2.84			
				CGPA: 3.07			

Grading System

80 - 100	A	60 - 64.9	C
75 - 79.9	B+	55 - 59.9	D+
70 - 74.9	B	50 - 54.9	D
65 - 69.9	C+	Less than 50	F

CU = Credit Unit
LG = Letter Grade
GP = Grade Point
GPA = Grade Point Average
CGPA = Cumulative Grade Point Average
50* = Retake/Supplementary





PRINTED ON
7/5/2018

SIGNATURE: 
Director of Academic Affairs (DAA)

SIGNATURE: 
Dean/Director of Faculty/School



UGANDA NATIONAL EXAMINATIONS BOARD

OUR REFERENCE: CF/UNEB/50

YOUR REFERENCE:

15 May, 2017

P. O. Box 7066,

Ntinda Tel: 0414 286635/6778,

Fax: 0414 289397

Kyambogo Tel: 0312 260753, 0414 289399, 286173,

Fax: 0312 260752

E-mail: uneb@africaonline.co.ug, uneb@uneb.ac.ug

Website: www.uneb.ac.ug

KAMPALA, Uganda.

The Registrar
Kampala International University
KAMPALA

EQUATING THE NIGERIA SENIOR SCHOOL CERTIFICATE EXAMINATION TO UGANDA CERTIFICATE OF EDUCATION (UCE)

Sani Tijjani Balas, Candidate Number 60087348EA sat for the Nigeria Senior School Certificate in the year 2016 at Pen Resource Academy, Lafiyawo, Gombe and obtained results which may be equated to Uganda Certificate of Education (UCE) as shown below:

SUBJECT	WEST AFRICAN GRADES	UCE EQUIVALENT
ENGLISH LANGUAGE	B3	C3
MATHEMATICS	C5	C5
BIOLOGY	C5	C5
CHEMISTRY	C5	C5
PHYSICS	C5	C5
INFORMATION COMM. TECHNOLOGY	C5	C5
AGRICULTURE	C6	C6

NB: UNEB is not responsible for the identity of the person mentioned in the letter.

Kagaba Peter (PhD)
For: EXECUTIVE SECRETARY

Basic Pharmacology	11
Human Anatomy	110

REPEAT

Basic Pharmacology 11	Human Anatomy 1110
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[illegible]

3/2/19
Prof. Leung

I have seen - it is
OK.

Please admit - I
will forward to you
the transcript.
Thanks for the work.

• Helpfully

Dr M. NSUBUUA

DVC - PA

① ndeungutse

② letter to
Chair B.T

③ Graduation

④ ndeungutse

⑤ Sheila Nakazibwe

⑥ Lope Nakalamba

⑦ Dr. Basaza

⑧ Verito Mwangi