2:1

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, Website: www.saiu.ac.ug

Undergraduate Application Form 2018/2019 and 2019 Academic Year

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

Title (Dr/Mr/Ms/Mrs/Rev): MS	Last Name(s): MUHAMMED MAGAJI
First Name: HAFSAT	Date of Birth: (dd/mm/yyyy)
Gender: Male ☐ Female ☑	Marital Status: Single ☑ Married ☐ Others (Specify below) ☐
Passport / ID No. A07615011	Nationality: NIGERIAN Country of Birth: NIGERIA
Country of Ordinary Residence: NIGERIA	Occupation: STUDENT Religion:

Permanent Home Address
(Physical Address)

NO 1 close aguma's palace

Telephone No:

Mobile No: 07045541 77 24/08/2018

Email: hafsat magaji 344@gmail.com Date of Application:

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

1st Choice:	BACHELOR OF MEDICINE AND SURGERY
2nd Choice:	Diploma in pharmacy
3rd Choice:	Diploma in clinical medicine

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 2019 ☐ April 2019 ☐ August 2018 ☑

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: Admit in MBChB 2:1

Application No.

Admit 2:1

Course

PARENT/GUARDIAN INFORMATION

(Give details of Parents and Guardian where applicable)

Father

Is father living? ☑ Yes ☐ No (Date Deceased 4/7/1990 dd/mm/yyyy)

Name: Alhaji Muhammed magaji

Nationality: Nigerian

Occupation: traditional ruler

Telephone No: Include Area/Country code +2348035869005

Mobile No: Include Area/Country code

Email:

Mother

Is Mother living? ☑ Yes ☐ No (Date Deceased _____ dd/mm/yyyy)

Name: Hajia Aisha magaji

Nationality: Nigerian

Occupation: Civil servant

Telephone No: Include Area/Country code ~~+2347035537065~~ +2347035537065

Mobile No: Include Area/Country code

Email: mayesha@gmail.com

Guardian

Is Guardian living? ☐ Yes ☐ No (Date Deceased _____ dd/mm/yyyy)

Name:

Nationality:

Occupation:

Telephone No: Include Area/Country code

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.

Examining Authority	
Name and Address of School: SHEIKH HAMIDAN SCIENCE SECONDARY SCHOOL Gwogetaba	
Year of Examination: 2	Index No.

Subjects (Include whether Principal (P) or Subsidiary (S))	Results/Grade						
	Papers						Overall Grade
	1	2	3	4	5	6	
marketing							fq
geography							C5
Islamic Studies							C4
civic education							C5
english language							~~E8~~ fq.
mathematics							C4
chemistry							C5
physics							E8
Biology							

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:	
Name and Address of School:	
Year of Examiination:	Index No.

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	B	ENGLISH LITERATURE		MUSIC	
AGRICULTURE	D	FINE ART	C	PHYSICS	C5
BIOLOGY		FRENCH	F	RELIGIOUS EDUCATION	D
CHEMISTRY	C4	GEOGRAPHY	C5	TECHNICAL DRAWING	
COMMERCE		HISTORY			
ENGLISH LANGUAGE	D	MATHEMATICS	D		

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

PERSONAL STATEMENT

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

Bec. The reason why I wish to undertake this program is to help human and the society as a whole to promote and scarifice for the well being of human beings.

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	Hajai aisha muhammed		
Physical Address	Aguma's palace		
Address	11	Postcode	
City / Town	Abuja	Telephone No	+2347038563765
Mobile No:	+2347038563765	Fax	
Country	Nigeria	Email	mayesha@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: 24/08/2018.

KAMPALA INTERNATIONAL UNIVERSITY
WESTERN CAMPUS

THE DIRECTORATE OF ACADEMIC AFFAIRS KIU-WC
P.O. BOX 71, Bushenyi - Uganda.
Tel: +256-775-004-624/ +256-750-712-687
Email: admin@kiu_wc.ac.ug
Website: www.kiu.ac.ug

PROVISIONAL RESULTS' SLIP

NAME: HAFSAT MUHAMMAD MAGAJI
SEX: FEMALE
NATIONALITY: NIGERIAN
PROGRAM: BACHELOR OF MEDICINE AND BACHELOR OF SURGERY

REGISTRATION NO: BMS/6733/172/DU
ENTRY MODE: DIRECT
DATE OF ENTRY: 24/04/2017
DATE OF BIRTH:

2016/2017 SEPTEMER — YEAR 1 SEM 0

COURSE CODE	COURSE TITLE	CU	CW	EYE	W	TT	LG	TP
MPP 102	Basics Of Computer Science	2	22	37		59	D+	2.5
MPP 105	Behavioral Sciences	2	26	46		72	B	4.0
MPP 110	Biology	2	26	50		76	B+	4.5
MPP 103	Biostatistics	2	20	33		53	D	2.0
MPP 113	Chemistry	2	26	35		61	C	3.0
MPP 101	Communication & Counseling Skills	2	29	47		76	B+	4.5
MPP 123	Community Health And Epidemiology	2	26	34		60	C	3.0
MPP 120	Enterprenuership	2	16	44		60	C	3.0
MPP 111	Mathematics	2	26	37		63	C	3.0
MPP 112	Physics	2	26	43		69	B+	4.5
MPP 106	Principles Of Ethics And Integrity	2	20	35		55	D+	2.5
MPP 104	Research Methodology	2	24	42		66	C+	3.5

GPA: 3.35

CGPA: 3.35

2017/2018 FEBRUARY — YEAR 1 SEM 1

COURSE CODE	COURSE TITLE	CU	CW	EYE	W	TT	LG	TP
MHA 110	Human Anatomy 1 (Histology/Upper And Lower Limbs/Embrology)	4	27	23		50	D	2.0
MCO 110	Introduction To Community & Community Diagnosis (Coberms) 1	6	31	38		69	C+	3.5
MBC 110	Medical Biochemistry 1 (Fundamental Of Biochemistry)	2	25	38		63	C	3.0
MPH 110	Medical Physiology 1 (Cell Biology/Excitable Tissues/ Blood And Body Fluids/Cvs)	5	25	32		57	D+	2.5
MSN110	Nursing Skills/Process	2	32	34		66	C+	3.5

GPA: 2.90

2017/2018 JUNE - JULY — YEAR 1 SEM 2

COURSE CODE	COURSE TITLE	CU	CW	EYE	W	TT	LG	TP
MBM 120	Basic Microbiology (Virology/Mycology/Bacteriology)	3	27	43		70	B	4.0
MBP 120	Basic Pharmacology 1 (Introductory And General Pharmacology/Ans/Autacoids)	3	27	37		64	C	3.0
MHA 120	Human Anatomy 2 (Thorax / Abdomen / Pelvis / Perineum)	4	26	39		65	C+	3.5
MIM 120	Immunology 1	2	30	41		71	B	4.0
MBC 120	Medical Biochemistry 2 (Metabolism)	3	25	39		64	C	3.0
MPH 120	Medical Physiology 2 (Respiratory /Renal/Endocrine/Reproduction)	3	22	37		59	D+	2.5

GPA: 3.33

2014/2015 GPA: 3.12

REMARK: NORMAL PROGRESS CGPA: 3.22

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 = Commutative Grade Point Average

50* = Retake/Suplementary

PRINTED ON

08/23/2018

SIGNATURE.....

Director of Academic Affairs DAA)

23 AUG 2018

KIU

WESTERN CAMPUS

P.O.Box 71 Bushenyi Uganda

SIGNATURE.....

Dean/Director of Faculity/School

KAMPALA INTERNATIONAL UNIVERSITY

FACULTY OF HEALTH SCIENCES

P.O.BOX 20000 KAMPALA

KING'S KIDS INTERNATIONAL SCHOOL
(PRIMARY & NURSERY)

Kutunku II Layout, Gwagwalada Abuja
P.o Box 56, Gwagwalada Abuja

Primary School Leaving Testimonial

This is to certify that ...MAGAJI LAFSA MUHAMMAD...

Has completed his/her primary education

From 20..04... to 20..10... Admission no 317

~~He~~/she offered the following subjects

1. MATHEMATICS 2. ENGLISH STUDIES 3. P.H.E
4. S/STUDIES 5. BASIC SCIENCE 6. C.A.R.S
7. CIVIC EDUC 8. BASIC TECH 9. HANDWRITING
10. QUANTITATIVE REASONING 11. VERBAL REASONING 12. HOME ECONOMICS
13. COMPUTER STUDIES 14. FRENCH LANG 15. V/APPRECIATION
15. .....

Responsibilities Held ...NIL...

Extra Curricular Activities ...ATHLETICS...

General Conduct ...SATISFACTORY...

Headmaster's Comments ...SHE IS A VERY BRILLIANT GIRL.

KINGS KIDS INTL SCH
SIGN
DATE 14/9/16
Headmaster's Sign
KUTUNKU GWAGWALADA

SHEIKH HAMDAN

MODEL SCIENCE SECONDARY SCHOOL
ALONG F.R.C.N. ROAD, GWAGWALADA F.C.T. ABUJA.
Tel: 09-8821359 E-mail:shmsss@mail.com

SHEIKH HAMDAN
MODEL SCIENCE SECONDARY SCH. G/LADA
KNOWLEDGE IS LIGHT
العلم نور

TESTIMONIAL

This is to Certify that

HAFSAT MAGAJI MUHAMMAD

Reg No: 40203077027

Has Completed Junior Secondary School

From: 2013/2014 *to:* 2015/2016

SUBJECTS OFFERED

(i) ENGLISH LANGUAGE
(ii) MATHEMATICS
(iii) CIVIC EDUCATION
(iv) MARKETING
(v) BIOLOGY
(vi) PHYSICS
(vii) CHEMISTRY
(viii) ISLAMIC STUDIES
(ix) GEOGRAPHY
(x)
(xi)
(xii)

General Conduct SATISFACTORY
Academic Ability GOOD
Participation in Co-Curricular Activities GOOD

Post(s) Held NIL

Principal
SHEIKH HAMDAN MODEL SEN. SCS.
GWAGWALADA ABUJA
DATE 6/8/2020

Principal's Signature & Stamp

Date _____ *day of* _____

THE WEST AFRICAN EXAMINATIONS COUNCIL
official website

Results

Candidate Information

Examination Number	4020307027
Candidate Name	MAGAJI HAFSAT MUHAMMAD
Examination	MAY/JUN WASSCE2016
Centre	SHEIKH HAMDAN MODEL SCIENCE SECONDARY SCHOOL, GWAGWALADA

Subject Grades

MARKETING	F9
GEOGRAPHY	C5
ISLAMIC STUDIES	C4
CIVIC EDUCATION	C5
ENGLISH LANGUAGE	C4
MATHEMATICS	F9
BIOLOGY	E8
CHEMISTRY	C4
PHYSICS	C5

Click Here to Print

Close Window

ST. AUGUSTINE
INTERNATIONAL UNIVERSITY
"Moral Re-armament, 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.

Names: HASFAT MUHAMMED MAGAJI

Mob: 0704554177

Email: Mhfsat magaji 344@gmail.com

Year: Two Semester: One

Signature: .....

ENROLLED PROGRAMME

BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (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

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 & Life Sciences

Student Name: HASFAT MUHAMMED MAGAJI

Academic Year: 2018/2019			Semester Year 2 Semester 1	
Date:	05th September 2018		Form No.	
Invoice Number:	470		Receipt No.	
Application No.				
Invoice to:	HASFAT MUHAMMED MAGAJI			
Programme:	MBChB			
	Particulars		Amount (USD)	Amount Total (USD)
	Tuition Fee		$2250	
	SAIU Scholarship			
	Application Fee		$21	
	Other (s)			
	PAID			
Payment terms:	Total		$2,271	

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 ..... Abinka

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@saiu.ac.ug

Finance Officer

05 SEP 2018 STAMP

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

Wednesday 1st August, 2018

Dear: HAFSAT MOHAMMED REGISTRATION NO: 2018AG/MBChB/2104

ADMISSION FOR AUGUST INTAKE 2018/2019 YEAR 2 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. 0236350484897 6 DFCU BANK, Kampala – Uganda.

Program Duration: FIVE (5) Years

Reporting Date: Saturday 4th August, 2018

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.

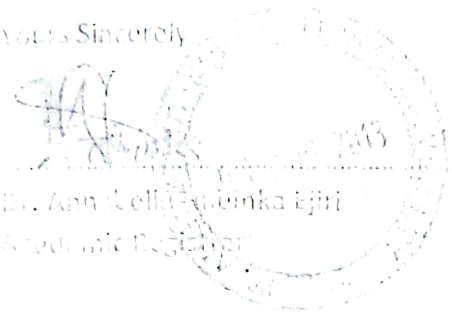
University Fees for the Semester

The tuition fees for the program in the academic year 2018/2019 are **United States Dollars Two Thousand two Hundred and fifty ($2250)** per semester. National Council for Higher Education fee is US $15 /8,000 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.

01 AUG 2018

Yours Sincerely



Dr. Ann Kelli-Nabenka Ejiri
Academic Registrar

Please note:

a) Fees paid are non-refundable.
b) A certified translation must be provided for all documents in a language other than English.
c) Any misrepresentation, falsification of documents, impersonation or providing false or inconsistent 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