



www.auca.ac.rw | registrar@auca.ac.rw | admissions@auca.ac.rw | +250 724796998

# UNDERGRADUATE APPLICATION FORM

[Click here to browse and upload your Passport Picture](#)

## PERSONAL DETAILS

Family name  
District  
Email  
Date of Birth  
Gender (Click button to choose)  
If married, name your spouse:

First name  
PO Box  
Mobile Phone  
Place of Birth  
Marital Status (Click button to choose)  
Number of Children  
Other names

## Nationality

Father's name  
Mothers' tongue  
Mother's name  
Other languages (If any)

## Religion

If Seventh-day Adventist:  Local Church  District Church

## Employment

Address of your employer

Health Status  Excellent  Good  Poor

Do you have any health problems or chronic disease? (Click button to choose)

If Yes, which ones (s)?

## FINANCIAL INFORMATION

Who will pay your School fees?

Address/Contact of your Sponsor

Mobile Phone

(Attach a letter of guarantee for payment of school fees to the university)

## ACADEMIC PROGRAMME

Tick the Major course you would like to pursue in the following Faculties:

- Business Administration:** Major:  Accounting  Management  Finance  Marketing
- Information Technology** Major:  Information Management  Networks and Communications Systems  Software Engineering
- Education** Major & Minor  Accounting & Information Technology  Geography and History  English Language and Literature
- Health Sciences** Major:  Nursing  Midwifery
- Theology:** Major:  Theology

### In Service Training

- Main campus (Education & Theology)  Gisenyi (Theology)  Bujumbura (Theology)

## EDUCATIONAL BACKGROUND

Secondary Schools attended:

#	Name of Secondary School	Year Begun	Year of Completion
1.			
2.			

Higher Learning Institutions attended

#	Name of Secondary School	Year Begun	Year of Completion
1.			
2.			

## REFEREES

Name and addresses of two referees who academically know you, one of whom should be either the Headmaster of Institution or his senior coordinator in charge of courses or discipline. An applicant in Theology must have a letter of recommendation from his/her Seventh Day Adventist Association or Union.

1. Name Mobile Phone
2. Address

When you decided to apply, where did you hear about AUCA? (Click button to choose)

Other  Specify:

## STATEMENT

I hereby declare that the above information given is true and complete. I am informed on the right of AUCA to refuse my application or cancel my registration any time the information given is proven to be wrong. I promise to undertake the academic regulations included in Student Handbook and AUCA Bulletin.

Name of the Applicant Signature

Done at on

RESERVED FOR AUCA ADMINISTRATION

Application received on ----- Certified copy of Diploma/Certificate -----

Applicant has a minimum of 2 Principal Passes ----- Option: -----

Grade reports/ Transcripts: S4 ----- S5 ----- S6 -----

Four (4) Photos Passports ----- Photocopy of Passport/ID Card -----

Receipt of non-refundable 20,000 Frws Application Fee -----