



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 ----- Proof of Health Insurance -----

Receipt of non-refundable 30,000 Frws Application Fee (Rwandan Applicants) and 50 USD for International Applicants -----