EASTLINK TRAINING INSTITUTE
"Learn, Earn & thrive"

APPLICATION FORM

Plot 4/6 Reuben Road, Namakwekwe, Mbale City, Eastern Uganda
Hotline/WhatsApp: 0768 363 821 | eastlinkinstitute@gmail.com

A. PROGRAMME APPLIED FOR

Department: _____ Level (Short course / Certificate / Diploma): _____

Programme: _____ Preferred intake: _____

B. PERSONAL DETAILS

Full name: _____ Date of birth: _____

Gender: ☐ Female ☐ Male ☐ Prefer not to say

Nationality: _____ National ID / Birth cert. no.: _____

Phone / WhatsApp: _____ Email: _____

Village / Town: _____ District: _____

C. EDUCATION BACKGROUND

Highest level: ☐ Primary ☐ O-Level ☐ A-Level ☐ Certificate ☐ Diploma ☐ Degree

Last school / institution: _____ Year completed: _____

Grade / result: _____ Current occupation (if any): _____

D. PARENT / GUARDIAN

Full name: _____ Relationship: _____

Phone: _____ Address: _____

E. HOW DID YOU HEAR ABOUT US?

☐ Friend / family ☐ Social media ☐ Radio ☐ Community outreach ☐ Walk-in ☐ Other

F. DECLARATION

I declare that the information given on this form is true and complete.

Applicant signature: _____ Date: _____

WHAT TO BRING

Copies of your academic certificates or result slips • Copy of national ID or birth certificate • Two passport photos

Submit this form at the institute office, or send a photo/scan to eastlinkinstitute@gmail.com. Fees and entry requirements: call 0768 363 821.