

PARTIAL SCHOLASHIPS FROM UGANDA COLLEGE OF HEALTH SCIENCES BWINDI

(UNDER TRANSITION TO AFRICAN UNIVERSITY OF SCIENCE AND MANAGEMENT)

Uganda college of health sciences Bwindi is a private not for profit (PNFP) health training institution under C.O.U Bwindi community hospital in the diocese of Kinkizi. The health-training wing of C.O.U Bwindi community hospital started in 2018 and has now grown into bigger health training institutions with diversity of health related

programs envisioning becoming a university by 2025.



Birds view of the college UCHSB

practicum site / teaching hospital Bwindi community hospital



New boys hostel under construction



Dental school under construction For training of public health dental officers starting 2025

Uganda College Of Health Sciences Bwindi through her scholarship project would like to offer Partial scholarship opportunities under the following programs for the July intake 2025

- Diploma in clinical medicine and community health **60** slots
- Diploma in nursing direct **20** slots
- Certificate in medical laboratory technology **60** slots
- Diploma in public health dentistry (upcoming) 20 slots

Scholarship terms and conditions

- The scholarship shall cover only tuition fees of the total payable fees
- Each successful student shall be given a **free kindle or I pad** to assist him or her in academics and research
- Each successful candidate shall only pay only half of the payable fees per semester (for accommodation, meals and functional fees) equal to 1,120,500/=



only for clinical medicine and diploma in public health dentistry (upcoming) and 1,073,300/= only for certificate in medical laboratory

- Each student shall pay examination fees to the examination body as determined and guild fees every semester to the respective accounts,
- Each student shall pay research fees **(only for diploma)**, graduation fees and gown fees **in the last semester only**.
- Each student shall provide for his or her own personal requirements and other requirements like uniform as demanded by the school
- Students with any other form of scholarship shall not be considered for this scholarship

Application process

- Print and fill the attached application form indicating clearly the course applied for according to the minimum entry requirements
- Write a personal profile indicating the qualities that make you suitable for scholarship.
- Scan the filled application form, personal profile, academic documents and a payment receipt of 35000/= application fee on the account number indicated in the application form and send in a single pdf to principaluchsb@gmail.com or whatsap on 0776183720 or deliver the documents physically at the college
- Successful applicants will be contacted and scholarship awarding letter and admission letter shall be sent to them online or picked physically from the college
- Candidates shall then be required to pay commitment fee of 400,000/= on receiving the admission letter. This commitment fee will be part of the payable tuition and shall be deducted from the semester payable fees. This is to confirm that you are taking on the opportunity such that if declined chance can be given to another applicant next in line
- Confirmed candidates shall report to the institution on the reporting date as indicated in the letters and present their scholarship letters to the accounts department for harmonization of their fees structure

Selection criteria:

- There shall be equal opportunity for all applicants irrespective of religion, tribe or race from all regions across the country
- Priority shall be given to;
- **Sons and daughters of clergy, lay readers** and other religious leaders as may be recommended by the diocesan secretary
- Needy students who may not manage paying full tuition for their education
- Students with good grades (academic performance)
- Students with special talents (foot ballers, athletes etc)

For more inquiries, call 0776183720

Yours
.....KEIZIRE ONESMUS
PRINCIPAL UCHSB



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APPLICATION FOR JULY 2025 INTAKE SCHOLARSHIP

AVAILABLE PROGRAMS (Please tick in the box for the program applied for)			
	DIPLOMA IN CLINICAL MEDICINE AND COMMUNITY HEALTH (+ Package In		
	Obstetric Ultrasound Scan) – 3 YRS - on partial scholarship		
	CERTIFICATE IN MEDICAL LABORATORY TECHNIQUES – 2 YRS – on partial		
	scholarship		
OTHER PROPOSED PROGRAMS JULY 2025 AFTER TRANSITION TO AUSM			
	DIPLOMA IN PUBLIC HEALTH DENTISTRY – 3 YRS – on partial scholarship		
	DIPLOMA IN SONOGRAPHY		

HOW TO APPLY

- 1. Attach a current-coloured passport size photograph to the form
- 2. Attach a copy of bank payment slip or receipt of **35,000**/= (thirty-five thousand shillings only) admission fee. (Money should be paid in the name of the applicant).
- 3. Application fees can be paid to the bank. **Name:** *Uganda College of Health Sciences Bwindi.* **Account Number** *9030016007330 Stanbic Bank Kihihi Branch*. Or paid to accounts office (ROOM 1) at Bwindi Community Hospital.
- 4. A filled copy of application can be returned physically to the school, or can be scanned with all other attachments as one pdf document. The pdf document should be named as applicant's name and be sent to principaluchsb@gmail.com uchsbwindi@gmail.com or unsbwindi@gmail.com or admin@unsbwindi.ac.ug.
- 5. Applicants can download the **application form** from the schools' websites www.uchsb.ac.ug or www.unsbwindi.ac.ug
- **6.** For enquiries, contact 0776789151 or 0392001825, 0776183720



PO Box 58 Kanungu, Uganda Telephone +256 (0) 3928 80242 uchsb@gmail.com www.uchsb.ac.ug

1.1 COURSE APPLIED FOR			
1.2 NAME OF APPLICANT (as they appear on academic and other official documents)			
Surname			
Middle name			
Last Name			
1.3 OTHER PERSONAL DETAILS			
Date of Birth (DDMM YY)			
GENDER (male/female)			
RELIGION			
DIOCESE			
NATIONALITY			
BIRTH DISTRICT			
CURRENT ADDRESS			
• District			
• Sub-county			
• Parish			
Village/Ward/Cell			
MARITAL STATUS			
CONTACTS (PERSONAL)			
Mobile phone number			
• E-mail address			
Where married (FILL N/A if not applicable)			
Name of spouse			
Occupation of spouse Contact of spouse (phone and email where			
possible)			
1.4 PARENT OR GUARDIAN			
NAME OF PARENT (NAME AND CONTACT)			
FATHER			
TATTIER			
MOTHER			
WHO WILL PAY YOUR FEES?			
(Name and contact)			
PARENT			
TAKENT			
SELF			
GUARDIAN/SPOUSE			
SPONSOR			





ENTRY REQUIREMENT (attach copies of your entry requirements to this form) DIPLOMA CLINICAL MEDICINE AND COMMUNITY HEALTH

- a. **Direct entry**; PLE pass slip, UCE with at least **a C** in Biology, Chemistry, Physics and at least with **a D** in Mathematics and English obtained at the same sitting
- UACE results slip or certificate or testimonial. (Must have a minimum of one
 <u>Principal pass in Biology and a subsidiary in Chemistry</u> and any other subsidiary
 pass in either <u>Mathematics or Physics or Nutrition</u> obtained at the same sitting
- c. **Extension/ upgrading**; Certificate in any related medical course with transcript from the relevant examination body
- d. Identity cards from schools attended for all both direct and extension.

CERTIFICATE IN MEDICAL LABARATORY TECHINIQUES

- a. Attach results slip for PLE, UCE pass slip or certificate or testimonial & Identity cards of schools attended.
- b. At least must have passed with **a C** in Biology, Chemistry, Physics & At least with **a D** in Mathematics and English.
- c. Age: Must be 18 years and above

OTHER PROPOSED PROGRAMS AFTER TRANSITION TO AUSM

DIPLOMA IN PUBLIC HEALTH DENTISTRY (upcoming) DIRECT ENTRY;

- a. PLE pass slip, UCE with at least **a C** in Biology, Chemistry, Physics and at least with **a D** in Mathematics and English at the same sitting
- b. UACE with at least one **Principal Pass in Biology, a subsidiary pass in Chemistry plus any other subsidiary pass in either Mathematics, Physics** obtained at the same sitting)
- **c. Extension/ upgrading;** Certificate in any related medical course with transcript from the relevant examination body
- **d.** Identity cards from schools attended for all both direct and extension.

DIPLOMA IN SONOGRAPHY

- a. PLE pass slip, UCE pass slip and certificate.
- b. UNMEB certificate or results slip
- c. Practicing licence/receipt from Uganda Nurses and Midwives council
- d. Identity cards from all schools attended.
- e. Attach all other professional documents

DISCLAIMER

UNEB, UNMEB and UAHEB hold the right to verify academic documents. Any falsification or impersonation once discovered on admission or during the course will lead to automatic disqualification with no claims on school fees or any other money that will have been paid to the school. Also note that offences may be prosecuted by courts of law as deemed necessary.

DECLARATION

I confirm that the information given here is correct
Name
Signature of applicant
Date