



THE REPUBLIC OF UGANDA
**MINISTRY OF GENDER,
 LABOUR AND SOCIAL DEVELOPMENT**



THE REPUBLIC OF UGANDA
 MINISTRY OF EDUCATION AND
 SPORTS



**Uganda
 Hotel
 Owners'
 Association**



**International
 Labour
 Organization**

**APPRENTICE APPLICATION FORM
 NATIONAL APPRENTICESHIP SCHEME**

PLEASE READ THIS IMPORTANT INFORMATION BEFORE COMPLETING THE APPLICATION!

- Please fill the application form correctly with a clear handwriting
- Shortlisting will be based solely on the information provided on this application form. CVs will not be considered.
- Please ensure that you provide a working email and/or telephone contact
- Eligible candidates shall have completed Uganda Certificate of Education (UCE) and passed a minimum of 3 subjects OR a National Junior Certificate in catering OR DIT Level 1 OR their equivalent.
- Application forms that are incomplete will be disqualified
- Invalid or incorrect contact details automatically disqualifies the applicant
- Additional details and the full advert can be found on the Ministry of Gender, Labour and Social Development website: <https://mglsd.go.ug/>

A	PERSONAL DETAILS	Respond or tick
1	Full Names (<i>as per ID</i>):	
	Age	<input type="checkbox"/> Less than 18 years <input type="checkbox"/> 18-35 years
2	Contact information	Tel 1: _____ Tel 2: _____ Email: _____
3	Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
4	Nationality	<input type="checkbox"/> Ugandan <input type="checkbox"/> Refugee
5	Please indicate your National Identification Number (NIN) or Refugee	NIN: _____

	Number	Refugee Number:_____	
6	Place of birth	Village:_____ Subcounty:_____ District:_____	
	Place of residence	Village:_____ Subcounty:_____ District:_____	
	Alternative telephone contacts:	Name:_____	Contact Number:_____

B. BACKGROUND ASSESSMENT*		Response
Highest level of education attained?	None (No formal education)	
	Primary Education	
	Secondary Education or Its Equivalent	
	University/ Tertiary Education	
	Adult Literacy	
	Others (Specify)	
Employment Status	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed	
Are you currently in education or training? If yes, please provide details	<input type="checkbox"/> Yes <input type="checkbox"/> No	

*Please note that information provided here will be verified during the recruitment process.

C. EDUCATION HISTORY		
Highest Qualification Obtained (Please attach copies of the relevant certificate (s))	Grade/Certificate/qualification attained	Date (from-to)
Name of the last highest School attended		

D. LANGUAGE SKILLS (add as appropriate)				
ENGLISH	Spoken	Fluent	Fair	Poor
	Written	Fluent	Fair	Poor
OTHER (please specify)	Spoken	Fluent	Fair	Poor
	Written	Fluent	Fair	Poor
OTHER (please specify)	Spoken	Fluent	Fair	Poor
	Written	Fluent	Fair	Poor

E. INFORMATION ON PLACEMENT/ SELF-ASSESSMENT	Response
What motivated you to apply for an appre	

nticeship in the hotel sector?			
What skills would you like to improve through the apprenticeship placement?			
Please select trade/ department of preference during placement period?	Food production/Cook/Chef	Front Office/Receptionist;	Housekeeping/Room attendant;
	Food and Beverage Service/Waitron;	Pastry and Bakery/Baker	Baristas and mixologist
What do you consider to be your greatest strength? Please provide one example that demonstrates this strength			
What do you consider to be your greatest weakness? Please explain how you are addressing this weakness.			

F	Disability	
10	Do you have any disability?	<input type="checkbox"/> Yes <input type="checkbox"/> No
11	If yes, please choose the category of disability:	<input type="checkbox"/> Hearing Disability <input type="checkbox"/> Mental Disability <input type="checkbox"/> Physical Disability <input type="checkbox"/> Visual Disability <input type="checkbox"/> Albinism <input type="checkbox"/> Little People <input type="checkbox"/> Others (Specify)

G. REFERENCES		
	Referee 1	Referee 2
Name		
Position		
Relationship to you		
Address		
Telephone		
Email		

H. DECLARATION
<p><input type="checkbox"/> By ticking this box I confirm that the information set out in this application is, to the best of my knowledge, true and complete. I understand that any false documentation or statement will automatically disqualify my application.</p> <p>Signature: _____ Date: _____</p>