



Uganda Association of Private Vocational Institutions

P.O. Box 27305 Kampala – Uganda, Tel: +256(0)414-266007, +256(0)414 267995

www ugaprivi.org Email: secretariat@ugaprivi.org

Your Partner in Skills Development

UGAPRIVI Member Registration and Data Collection Form

Date:

This data collection form is intended to get information from the UGAPRIVI members on first registration as a member or on the subsequent submission of information. This form is filled annually, at the beginning of the academic year. This will be treated as confidential and will be used for research and planning. Copies are made from the filled form for the member institution and the regional office and the original is submitted to the National Secretariat.

1) YOUR INSTITUTION

- 1) Name of the Institution
- 2) Year of establishment Place
- 3) UGAPRIVI Region ☐ Central ☐ South ☐ South-West ☐ West A ☐ West B ☐ West Nile ☐ North ☐ East A ☐ East B
- 4) District County/Sub-county Plot No.
- 5) Description
- 6) P.O. Box Post Office
- 7) Phone Other Phone
- 8) Email address Website
- 9) Principal (Contact Person) Phone Other Phone.....

2) SCHOOL TYPE

- 1) Entry Requirements ☐ PLE ☐ UCE ☐ UACE
- 2) Sex ☐ Mixed ☐ Girls ☐ Boys
- 3) Boarding Facilities ☐ Day ☐ Boarding ☐ Day and Boarding
- 4) Location ☐ Urban ☐ Peri-Urban ☐ Rural ☐ Rural & very remote

3) AFFILITATIONS

Ministry of Education and Sports	No.	Date
UBTEB Business Exams Centre	No.	Date
UBTEB Technical Junior Exams	No.	Date
UBTEB Technical Craft Exams	No.	Date
UBTEB Technical Diploma Exams Centre	No.	Date
DIT Exams and Assessment	No.	Date
NCHE Provisional License	No	Date
NCHE Certificate of Reg. & Classification	No	Date
UGAPRIVI Registration	No	Date
Affiliations to other Institutions		

Does the Institution have other branches?

4) OWNERSHIP

- 1) Type of ownership ☐ Individual ☐ Company ☐ Association ☐ Religious ☐ Other
- 2) Name of proprietor
- 3) Phone Other Phone
- 4) Email address
- 5) Website

5) BOARD OF GOVENORS / GOVERNING COUNCIL

No	Name	Sex	Appointment Date	Expiry Date	Body Represented					Position in Council/Board						Highest academic Qualification						
					Political / Civil Servant	Professional	Business Person	Clergy	Other	Chairman	Vice Chairman	Secretary	Treasurer	Member	Other	PhD	MA	MSc	BA	BSc	Diploma	Certificate
1																						
2																						
3																						
4																						
5																						
6																						
7																						
8																						
9																						
10																						
11																						
12																						
13																						
14																						
15																						

6) Academic Staff

No	Post/Title					Name	Sex	Date of birth	Registration No. / UTS No.	Employment Status				Date of Appointment	Teaching Qualification *		Qualification	Subjects	ICT Qualification		Phone	Email			
	Principal	Deputy Principal	Director of Studies	Head of Department	Instructor					Other	Full Time	Part Time	Contractor		Temporary	CTE			DTTE	BTE			PhD	MA	MSc
																		See table on the last page, please enter the corresponding number.							
1																									
2																									
3																									
4																									
5																									
6																									
7																									
8																									
9																									
10																									
11																									
12																									
13																									
14																									
15																									

[illegible]

* CTTE: Certificate in Technical Teaching Education / DTTE: Diploma in Technical Teaching Education / BTTE: Bachelor in Technical Teaching Education

7) PROGRAMMES OFFERED AND ENROLMENT

No	Programme/Course	Year one		Year two	
		Male	Female	Male	Female
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					

UGAPRIVI is emphasising training with production, which of the above programmes have been embedded into production and what are you producing?

.....

.....

8) STUDENTS' PERFORMANCE DETAILS

No	Year of last exam	Course Title <i>See table on the last page, please enter the corresponding number.</i>	UBTEB Examination Results			DIT Trade Tests			Actual Total
			Pass	Fail	Total	Pass	Fail	Total	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									
19									
20									
21									
22									
23									
24									
25									

9) BASIC PHYSICAL TRAINING FACILITIES & INFRASTRUCTURE

1) Buildings

	Permanent	Temporary	Size	Owned/Rented	Total
Classrooms					
Workshops					
Staff Rooms					
Library					
Store					
Staff House					
Offices					
Examination Hall					

2) Land

No.	Description	Surveyed/Un-surveyed	Address	Hectares	Rented/Owned
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

3) Machinery and Equipment

No	Type	Brand/Model	Amount
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			

4) Water and Sanitation

- i) Source of water: ☐ National Water ☐ Borehole ☐ Community Well ☐ Rain Water ☐ Stream/River
- ii) How many stances of pit latrines do you have? Male Female
- iii) How many bathrooms/shelters do you have? Male Female

5) Means of Communication and Power Source

- i) How many vehicles does your institution have?
- ii) Source of power ☐ UMEME ☐ Solar ☐ Generator ☐ No power

10)EXTERNAL SUPPORT

- 1) Does your Institution receive external donor support? Please specify.
.....
.....
.....

11)MONITORING AND INSPECTION

- 1) Have you been inspected by any government organ? Please specify and attach the report.
.....
.....

12)PARENTS/COMMUNITY INVOLVEMENT

- 1) How often do you hold open days (in a year)?
2) How often do you hold parents days (in a year)?
3) How often do you hold sports days (in a year)?
4) How often do you hold exhibition days (in a year)?
5) Others
.....
6) How many students do you send for Industrial Training?
7) Do you conduct tracer studies? What's the impact in Percent?
i) Formally Employed
ii) Self Employed
iii) Unemployed

13)MEDICAL FACILITIES

- 1) Do you have a clinic at your Institution? If not how far is the next medical facility?

Title:

Name:

Date:

Signature:

Thank you very much for your participation!

Programmes/Courses

- 1) Agriculture/Organic Farming
- 2) Beautician/Cosmetology
- 3) Brick Laying and Concrete Practice
- 4) Business Studies/Accountancy
- 5) Carpentry and Joinery
- 6) Catering & Hotel Management
- 7) Computer Training
- 8) Electrical Installation
- 9) Fitting & Machining
- 10) Hairdressing
- 11) Handicrafts
- 12) Home Economics
- 13) Leather Works
- 14) Motor Vehicle Mechanic/Motor Vehicle Technician
- 15) Nursery Training
- 16) Painting & Decoration
- 17) Plumbing
- 18) Secretarial Studies
- 19) Tourism
- 20) Tailoring and Cutting Garment/Fashion Design
- 21) Welding and Metal Fabrication
- 22) Electronics (Radio/TV/Mobile Phones/Computer)
- 23) Motor/Transformer Rewinding
- 24) Motorcycle Mechanic