THE INNOVATIVE UNIVERSITY OF ENGA

								I will e	ither fi	nd a wa	ay or m	ake one			
Student No (office use only)							Enquiry No (office use only)								
															Innovative University of Enga

2026 UNDERGRADUATE AND POST-GRADUATE DIPLOMA IN EDUCATION APPLICATION FORM

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All students applying for the undergraduate a	-	-	s must	apply	throug	h the	Jniver	sity's A	Admiss	sion Of	fice ar	nd use	this fo	rm to			
apply for all undergraduate including nursing	and educ	ation.													_		
1. PERSONAL DETAILS (USE BLOCK LETTERS)																	
Title Mr Mrs Ms	Miss	;	Other					Ge	nder:	М		F			_		
Family Name:																	
First Name:																	
Former Family Name (If applicable)		Date of Birth: d d m m y y y y															
Have you previously made an application to unde	ertake or be	en enrol	led in a	cours			ative U	niversit	y of En	ga?					2		
Yes No If YES, please give your student number																	
<u> </u>		ı r NID nı	ımber														
	Yes No	1.000	, p. o														
If NO, state reasons:																	
Mailing Address					Hom	e Add	ress	(if diffe	erent f	rom m	ailing	addre	ss)				
Po Box or Street Adress:					Home Address (if different from mailing address) Po Box or Street Adress:												
Town/Village:					Town/Village:												
Province:	Post	Code:			Provinc	Province: Pos									st Code:		
District:	<u> </u>				District:												
Mobile:					Mobile:												
All correspondence will be sent to your email address																	
Email:																	
2. COURSE APPLICATION	•	<u> </u>									•						
1st Preference Course Name:																	
2nd Preference Course Name:																	
3rd Preference Course Name:																	
Second and third preferences will only be consid	ered if unsu	ıccessfu	l with y	our firs	t choice)											
3. SECONDARY/TERTIARY EDUCA	TION																
Secondary Studies Grade 12 SLF	No:																
Have you completed a Secondary School in PN	G?														_		
Province:		Town/City:				Year:			School:								
If YES, please advice																	
Other Secondary or Tertiary Studies																	
Qualification/Award	ion		I	larks .	Achiev	ed		Date Completed									
										d		d r	n r	m	У		
										d		d r	n r	m	У		
										d		d r	n r	m	У		
Courses Offered:																	
Bachelor of Education in Primary Teaching				Bach	elor of	Scien	e in P	hysics		Gr		e Diplo Feachi					
Bachelor of Education in Early Childhood									elor of Science in Chemistry								
Bachelor of Arts (English)		chelor of Science in Biology															
Bachelor of Mathematics		Ħ			chelor				_	i							
	_							ŭ		_							

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4. WORK EXPERIENCE(S)

8. FEE

Who is paying your fee? Tick the appropriate box.

4. WORK EXPERIER	• •											44		
Employment Record	: List most recent employ	ment position	n firs	t.							Innovative Univers	sity of Enga		
Date (from-to)	Employer		Addres	ss			Mobile	/Phon	e	Po	Position/Responsibilities			
5. CHARACTER RE	FERENCE													
	pleted by a COMMUNITY OR F	RELIGIOUS LE	ADFR:											
	volvement in local church/commu				and si	ıitahility	/ for te	rtiary e	ducatio	nn at II I	IF.			
Common on applicant our	volvoliloni ili local citatory commit	army donvinoo v	VIII.1000	to raitiri,	and or	ancabinit)	, 101 10	ilary o	aacan	J. 1 at 10				
Name:		Position/Title	Held:											
											_			
Signature:		Date:			-]			
olynatur <u>e.</u>		Date.	U	u	111	111	У)	/)	/			
6. CHECKLIST BOX														
The applicant should subm	it the following together with this	completed appl	ication	form										
Recent passport siz			2x rec	ent cha	racter	referen	ces							
Receipt of K50 appli)	Valid Police Clearance Certificate (current)												
Transcripts/certificate		Current Medical Certificate from a certified medical practitioner Copy of withdrawal letter if former student												
Grade 10 & 12 certi			Сору	of with	drawal	letter if	forme	r stude	ent					
				A pers	onal st	atemer	nt as to	why y	ou war	nt to enr	roll at the IUE and	d why you w		
7. DECLARATION A	ND SIGNATURE													
Declaration of Information	Accuracy and Permission for Ver	rification												
Decial ation of fill of mation	Accuracy and remission for ver	incation												
I,	hereby declare that all t													
	ny knowledge and belief. I underst mission. I also acknowledge that th	•	-		_			•						
·	·	•			·						, , ,			
	n to contact any relevant institution: admission. I fully understand and a							n provid	ded in n	ny applio	cation for the purpo	ose of		
0 , 0 ,	,	·	30.											
Signature:	Date:/													
Eligibility Criteria														
• ,	lections applicants must study A	LL the following	five su	ıbjects i	n Grad	le 12 to	be co	nsidere	ed for t	ne IUE	Science Foundat	ion Year:		

Applications must be returned by 30 September, 2024 by **Post** and must be accompanied by an Application Fee of **K50.00** The application form will not be processed if these payment is not made. This Fee is to be paid into the BSP A/c No.0000 287145, (IUE Tuition Fee Acc) Wabag Branch and the receipt should be attached to this Application. All academic documents must be provided including transcripts at the time of applying.

Applications to made by:

Self

Post to: The Admission Officer, Innovative University of Enga, PO Box 387, WABAG, Enga Province

Email: admissions@iue.ac.pg or binglismyalanem@gmail.com

Sponsor – Name your sponsor