

UGANDA BUSINESS AND TECHNICAL EXAMINATIONS BOARD

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Ntinda.

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Application form to Collect Academic Transcripts & Certificates

This form must only be filled by the UBTEB Head of Center or his/her Authorised Officer.

1. Examination Center Details

Examination Center Name:	
Examination Center No(s):	
Contact email address:	
Contact Officer & Phone Number:	

2. Details of Academic Documents to be Collected

Document Type:	Transcript <input type="checkbox"/>	Certificate <input type="checkbox"/>
Program Codes:		
Cohort (eg, August 2017 Entry):		
Date of Appointment Requested: (DD/MM/YYYY):		
Name of Head of Center		
<i>I give my consent for UBTEB to provide my examinations center Transcripts, Certificates and other related documents to the bearer of this form (Please Tick the box)</i> <input type="checkbox"/>		
Insert Digital Authorised Signature		
Date (DD/MM/YYYY)		

3. Confirmation of Appointment by UBTEB Officials

Name of Authorised Officer:	
List Confirmed Documents available for Collection:	
Confirmed date of Collation (09:00am to 02:00Pm):	
Insert Digital Authorised Signature & Date:	