

Kampala application

Kampala Application Form

Kampala Application

All applicants should fill up this form and send to BISS Bakeries Uganda. It should be done online or physically delivered.

Training is open to everyone sponsored or self-sponsored.

For one to qualify should be 16 years and above.

1. Applicant information

First Name

Last Name

Date of Birth

Ward

Village

Parish

Subcounty

County

District

Marital Status

Do you have any form of disability?

If yes specify:

Email

Contacts:

Education level (kindly attach the documents).

- ☐ Did not attend school
- ☐ Primary
- ☐ Secondary
- ☐ Tertiary
- ☐ University

Education level details

School/institution	Year/period	Award	
			+

How many languages do you speak:

Outline the languages spoken:

My main interest is;

- ☐ Seeking employment
- ☐ To start my own business

Have you ever baked professionally or personally? What products?

Do you have a business idea or concept that you would like to develop?

Can you commit to a residential training program for 8 weeks focusing solely on course without external obligations?

- ☐ Yes
- ☐ No (sorry you cannot qualify for this training)

Is there any medical condition we should know about? If yes, kindly share:

Kindly list any allergies:

Are you on any kind of medication for a chronicle disease? If yes, kindly share:

Applying for:

I would like to enroll in the following training:-

- ☐ 50% Scholarship
- ☐ 100% Scholarship

I would like to enroll in the following training:-

- ☐ 23rd March – 11th April (3 weeks)
- ☐ 3rd – 22nd August (3 weeks)
- ☐ 7th – 26 September (3 weeks)
- ☐ 1st June – 25th July
- ☐ 19th October – 12th December

Kindly attach:

- Copy of national ID of you and/or Guardian/Sponsor
- Academic documents
- Motivation Letter

File Upload

Choose File

Guardian Name

Relationship with guardian

Guardian's Contact

Guardian's Signature



Choose File

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Motivation Letter for joining the BISS Bakeries Kampala

What is your motivation to attend the BISS Bakeries training?
Have you ever run a business? If yes, what were your strengths

and challenges?

Are you interested in Entrepreneurship or Employment opportunities?

Are you interested in applying for a BISS Start-up-kit after the training?

- ☐ Yes
- ☐ No
- ☐ Maybe

What interests you about Baking?

What are you currently doing for a living?

What is your current profit or income per day/month?

- ☐ Day
- ☐ Month

Enter amount below

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