



THE GREAT LAKES INSTITUTE OF PEACE STUDIES

APPLICATION FORM FOR SHORT COURSES

1. Course Information

Course Title: _____

2. Personal Information

Full Name (as will appear in a certificate) _____

Age: _____ Sex: _____ Nationality: _____

Organization: _____ Title: _____

3. Contact Information

Physical Address: _____

Postal Address _____

Telephone: _____ E-mail: _____

4. Education Background (post-secondary education only)

Institution	Year	Qualification	Award

5. Work Experience (your most recent work experience relevant to this training)

Organization	Year	Position	Responsibility

6. Payment details

Are you paying for the course yourself***? Yes No

If no, give details of your sponsor

Name of Sponsor _____ Contact Person: _____

Address: _____

Telephone: _____ E-mail: _____

7. Signature

Applicant _____ Sponsor (if applicable) _____

Return completed application form to our office at Plot 10 Lagoon Road, Gulu Municipality or by e-mail to glipssuganda@gmail.com

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