

DIRECTORATE OF INDUSTRIAL TRAINING (DIT) MINISTRY OF EDUCATION AND SPORTS

P.O Box 20050, Kampala, Uganda TEL: 0414259412/0414251256

info@dituganda.org

Document Title: Application form for Assessors

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Jan/2021

Document No: DIT/AC/F004

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Issue No: 01

Rev. No: 0

	Section A: Personal Details
	Section A: Personal Details
Name	
Sex	
Date of Birth	
District	
Home Address	
Phone Number	
Email	

Occupation applied for:.....

Section	on B: Current Employment Details
Organisation name	
Position/Designation	
Office Phone	
Location	
District	
Phone Number	
Email	

Section C: Academic Background

- **a. General Education** (Circle the appropriate figure)
- Primary 1, 2, 3, 4, 5, 6, 7
- Secondary 1, 2, 3, 4, 5, 6

b. Technical/Occupational Qualifications

Qualification	Institution	Location	Date of Receipt of Qualification

(Attached certified copies of the certificates)



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Section D: Work Experience

	Institution	Location	Position
Costion F. Addi	tional Compatance		
	tional Competences		
	ualifications? Yes No [s and attach certified copies		
ii yes, piease provide details	s and attach certified copies	or certificates.	
If recruited as an Assessor	what additional values will yo	ou be able to contribu	ite to the TVET sec
	Section F: Deck	aration	
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...Promote employable skills