



# SAPIENTIA INTERNATIONAL UNIVERSITY

State of Delaware- Department of State  
Registration No 5621694 by Secretary of State  
16192 Coastal Highway, Lewes, DE 19958, Sussex (USA)  
Web: www.sapiu.us, Email: info@sapiu.us, Phone: +16138894023

## APPLICATION FORM FOR ADMISSION FOR BOTH UNDERGRADUATE AND POSTGRADUATE STUDIES

- 1 All applicants are required to submit two copies of this application form
- 2 Each candidate is allowed to submit copies of academic credentials of previous education levels (high school certificate or diploma for undergraduate degree applicants and bachelor's degree for master's applicants and master's degree for doctoral applicants), copy of national ID or passport and 4 passport photos.
- 3 All doctoral applicants have to submit filled application form with research proposal not more than 7 pages. The proposal of yours have to clarify you research objectives, statement of the problem and critical literature review and clarification of what you want to accomplish.
- 4 All applicants will have notification of admission or rejection of their application after evaluation of their credentials and other candidate supporting documents in 2 days after application. Admitted student will be given 1 day to pay admission fee of 60USD undergraduate and 120USD for postgraduate at the account number 00270-07721465-19/USD in Bank of Kigali.

### I. APPLICANT'S PERSONAL INFORMATION

First name.....

Last name.....

Present address.....

Date of birth.....

Country of birth.....

Nationality.....

Citizenship.....

Telephone No.....Email.....

Sex                      male                       female



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Marital status                      single                       Married

## II. EMPLOYMENT HISTORY

Current employer .....

Employed as .....

Employed from ..... to .....

Place of employment .....

Contract status .....

Previous employer .....

Employed as .....

Employed from ..... to .....

Place of employment .....

Other working experiences.....  
.....  
.....  
.....

## III. EDUCATION HISTORY

Institution attended	Year of completion	Awarded certificate, diploma or degree
High school/University		



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Program applied for.....

Each applicant can choose his program of study as listed below:

## Organized academic programs

Faculty of health sciences	Faculty of education	Faculty of science	Faculty of engineering	Faculty of economics and management
<b>1 Department of general nursing:</b> <ul style="list-style-type: none"> <li>- Bachelor of science in nursing</li> </ul>	<b>Department of education management:</b> <ul style="list-style-type: none"> <li>- Bachelor of education management</li> </ul>	<b>1 Department of environmental management:</b> <ul style="list-style-type: none"> <li>- Master of environmental management</li> </ul>	<b>1 Department of biomedical engineering:</b> <ul style="list-style-type: none"> <li>- Bachelor of biomedical engineering</li> </ul>	<b>1 Department of business Administration:</b> <ul style="list-style-type: none"> <li>- Bachelor of science in Accounting</li> <li>- Bachelor of science in finance</li> <li>- Master of business administration(MBA) in accounting, finance and project management</li> <li>- PhD of business administration in accounting, finance and project management</li> </ul>
<b>2 Department of public health:</b> <ul style="list-style-type: none"> <li>- Bachelor of human nutrition and dietetics</li> <li>- Masters of public health in health service management</li> <li>- PhD in public health</li> </ul>		<b>2 Department of food science and technology:</b> <ul style="list-style-type: none"> <li>- Bachelor of food studies</li> </ul>		<b>2 Department of human resource management:</b> <ul style="list-style-type: none"> <li>- Bachelor of Human resource management</li> <li>- Master of human resource management</li> </ul>



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## IV. APPLICANTS REFEREES

1 ..... Phone..... Email.....

2 ..... Phone..... Email.....

3 ..... Phone..... Email.....

**NB:**

**1 All Applicants will receive their admissions with all details including tuition, study center and all about his admitted program.**

**2 If the faculty you are applying for is not listed above; feel free to contact +250783031724 or [iyavenant@yahoo.fr](mailto:iyavenant@yahoo.fr), by this contact, you can ask all queries about your application**

## DECLARATION

I .....certify that all provided information are true and allow the university to reject my application for any untrue information in my application.

Date...../...../.....

Applicant's name and signature