



THE REPUBLIC OF UGANDA

BOND AGREEMENT

BETWEEN

.....

AND

.....

Know all men by these present that has been awarded a scholarship by for training in and under the terms of the said scholarship is required to enter the conditions set out herein below and which said conditions and rules shall form an integral part of this agreement.

The conditions referred to above are as follows:

1. The person to whom the scholarship is awarded shall be required:
 - (a) To complete the course for which the scholarship has been awarded and follow the rules as may hereafter be made whether by way of amendment or otherwise by the Responsible Officer of the relevant Ministry, Department, or Local Government or other person or committee of person so appointed/nominated by him or her that behalf governing the award of scholarship.
 - (b) On completion of training to return to his or her Ministry, Department, or Local Government and resume working in the capacity for which his or her course of instruction was adjusted by the Responsible Officer of the relevant Ministry, Department, Local Government or other person or committee of persons so appointed, and to continue in that service for a period not less than 3 years.

PROVIDED that the Responsible Officer or such committee of persons so appointed shall have power to release him or her from such obligation at any time before the expiration of the above period of 3 years as thought fit, but in the event of a breach of any or all the above conditions the bond shall remain in full force and effect.

- (a) This scholarship is sponsored by
- (b) The training course commences on the day of and ends on the day of

I, hereby declare in the presence of that the scholarship awarded to me shall be governed by these rules and that in the event of a breach by me of any of the above

rules my scholarship shall be suspended or terminated forthwith and I shall be called upon to pay the equivalent of the salary and other training related expenses incurred to sponsor me for the said training, within 6 months.

SIGNED by the said}

this of

In the presence of OBLIGATOR.

Signed by

this of

In the presence of RESPONSIBLE OFFICER
DESIGNATED PERSON/COMMITTEE
CHAIRPERSON

this of



RECOMMENDATION BY THE RESPONSIBLE OFFICER FOR AN OFFICER TO PROCEED ON TRAINING/STUDY LEAVE

Ministry/Department/Local Government.....
1. Personal Information
(a) Name.....
(b) Date of Birth.....
(c) Date and Min. No of first Appointment.....
(d) Confirmation Min. No.....
(e) Present Post (Date & Min. No of Appointment).....
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(f) Salary Scale of the post.....
2. Educational Background*
a) Uganda Certificate of Education (UCE) or equivalent (grade and year)
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b) Uganda Advanced Certificate of Education or equivalent (UACE) (grade and year)
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c) Diploma(s) - (class and year).....
d) Degree (s) -(class and year.....
e) Any examinations passed other than in (a), (b), (c) or (d) above
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If the candidate did not pass the Uganda Certificate of Education examination, full details to be given of examination passed and dates

3. Proposed Course

(a) Title of the Course.....
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(b) Location of Course (Institution & Country)

(c) Commencement & ending date.....

(d) Evidence of admission*.....

(e) Brief Description of course

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(f) Award expected.....
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4. Purpose of Course.....
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(a)	If to increase efficiency in present post, indicate the benefit which the course will give.
(b)	Will the successful completion make the officer eligible for promotion to a higher post? If so, give details of higher post.
(c)	If to obtain a qualification necessary before promotion to a higher post, give the qualification and the higher post.

5. Details of any Officer (s) already possessing the same qualifications the applicant is aspiring to obtain.....
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6. Particulars of any Officer (s) undergoing training to obtain the same qualifications as will be obtained by the applicant.*
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7. Particulars of other Officer(s) in need of the same training. **
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8. Supersession

If the answer to (b) or (c) in section 4 is in the affirmative, give details of any officer(s) who would then be superseded and of the reasons thereof.

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9. Source of Funding/ Sponsorship (Indicate costs and source of funding for the training).*

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10. Recommendation of the Responsible Officer:

Name Designation

Signature Date.....

**Documentary evidence should be attached.*

***Separate sheets should be attached if necessary.*