

Date:

Student Academic Services (SAS) Office PO BOX R113, Kukum Campus Honiara, Solomon Islands TELEPHONE: +677 42617

EMAIL: <u>admissions@sinu.edu.sb</u> WEBSITE: www.sinu.edu.sb

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Please carefully read	he instru	ctions belo	w before	e comple	eting each pa	rt of	the form).						
1. This Form	MUST be	completed	by <b>EVE</b> !	RY perso	on seeking ad	missi	on to SINU.						
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		UIRED DOC											
					your applicat	ion fo	rms. Please	check (1	√) the req	uired documents	befo	re submission.	
	Certifi	ied copies c	of Certifi	cates, A	cademic resu	lts or	Transcripts						
	Certifi	ied copy of	Your Bir	rth Certif	ficate								
	Spons	or Letter o	<b>f</b> Agreen	nent (ap	plicable only	to th	ose who ha	ve secur	ed sponso	orship)			
	A Refe	erence lette	er or any	support	ting documer	nts fro	om employe	er (for In-	service e	ntries)			
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4. All fields n		-		-	ust be comp			will flot i	JE CONSIG	ereu.			
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6. Send the d			_		lemic Service	s (SA	S) Office						
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7. The last da	y of subn	nission is:			30 <sup>th</sup> Janu	ary 2	2026						
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## **SECTION A: PERSONAL DETAILS**

TITLE*	FIRST NAME*	M	IDDLE NAME:	SURNAME*					
Mr, Mrs, Miss etc)	<u> </u>		_						
Date of Birth*	<del></del> ,		lease Tick) *	Marital Status (Please Tick) *					
Day Mont	th Year		Female Male	Single Married Other					
		<u> </u>	Viale						
Constituency:			Country of Citize	enship:					
Province:			Place of Birth:						
Ward Name:			Passport Number: (If International and regional student(s) only)						
Postal Address:			Guardian Address (If under 18 years)						
			Name:						
Residential addres	ss:		Address:						
Email address:			Phone:						
Phone Contact:			Email address:						
	_		<u>I</u>						
Emergency Contact	ct: * a person who can be contac	atad in case	-f -marganey	ladicate the relation of the nercon					
rovide details of a	person who can be contac		or emergency.	Indicate the relation of the person you have given:					
Name:				Parent Other Family					
Residential addres	SS:			Member					
Ti Carata atu N	t andi:			Spouse Non Family Member					
Phone Contact: M	Mobile: Landlin	ne:		HIGH SCI					
EFCTION B: APF	PLICANT TYPE (🗸) Tick one	es anlu) *		_					
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(Those	who have completed Form 6 or 7	7 within the last	5 years)						
(Those	way Applicant  e who have completed a University  nized institution).	y preparation pı	rogramme, or underta	aken TVET, or higher education studies at a					
Matu	re Age Applicant								
	rmal study in the last 5 years) national Applicant								
	Solomon Islands citizen)								

## **SECTION C: SPONSOR DETAILS**

SPONSOR/PRIVATE:			Sponsor's Phone:							
Sponsor Name:						Sponsor's Email:				
Note: If you are sponsored, ttached to this application)  SECTION D: STUDE					Plea	se Tick One Private	7	Private W Staff Con		
Secondary and Pre-Cert	<u>tificate</u>									
Third Form	Fifth Form			Sixtl		Pathway Programme (e.g. SINU UPC, USP Foundation etc.)				
School:	School:			School:	School/Institution					
Year:	Year:			Year:		Year:				
NOTE: You must attach Ce reference letter from your Tertiary Studies Qualif	School's Caree	•		-		-		udents nee	ed to get	
nstitution Progra		ramme Years Attended			Major Field of Study			Date Graduated (If Applicable)		
<b>NOTE:</b> You must attach Ce	rtified copies c	of all Academic Tr	anscript and Certif	ficates f	or the Tertiary (	Qualification y	ou attaine	ed.		
Employment History Current Employment: f currently Employed)	Organisati	on		Titl	e	Pei	riod of Eı	mployme	nt	
					Start			End		
revious Employment										
Years	ion J			b	Start	Start E				

## **SECTION E: SPECIAL NEEDS/DISABILITY**

Do you have special needs, medical conditions or any dis	abilities that SINU should be aware of:
YES NO	
If yes, please specify(Please attach a copy of medical report)	
SECTION F: STUDENT DECLARATION	
I Declare that the information given in this application is I acknowledge that the University reserves the right to do information is incomplete and/or false.	
Applicant Signature:	Date:

## FOR OFFICIAL USE ONLY CC/Initial Comment Student Registration Contact Details Scan Documents Education Background Application Acknowledgement OUTCOME: Qualified Qualify with Condition Unsuccessful Offer Letter Issued Offer Letter Received Admission Study Plan Enrolled Confirmation Letter