THE AGA KHAN UNIVERSITY

OFFICE OF THE REGISTRAR, UGANDA

Our Ref: AKU/RU/14/11/2025 **Date: November 14, 2025**

RECOMMOENDATION FORM
(TO BE FILLED BY SUPERVISOR/DEPARTMENTAL HEAD)

POST RM-BScM MIDWIFERY, POST RN-BSC IN NURSING DEGREE
EN-RN DIPLOMA IN NURSING EXTENSION

Name of applicant: _____

This applicant is interested in admission to our _____ programme. We appreciate your evaluation in the following areas:

	Excellent	**Above Average**	**Average**	**Below Average**	**Not Known**
Clinical Nursing Competence	☐	☐	☐	☐	☐
Analytical Ability	☐	☐	☐	☐	☐
Integrity	☐	☐	☐	☐	☐
Dependability	☐	☐	☐	☐	☐
Initiative	☐	☐	☐	☐	☐
Communication Skills	☐	☐	☐	☐	☐
Leadership Ability	☐	☐	☐	☐	☐

Please add any comments that will help us better understand this applicant:
_____
_____
_____
_____

Please indicate the strength of your overall endorsement of this applicant for admission

☐ Highly Recommended ☐ Recommended with Reservation

☐ Recommended ☐ Not Recommended

Organization: _____

Name: _____ Position: _____

Postal address: _____ Phone: _____

Signature: _____ Date: _____

Official Stamp …….