	IM
CHARREN OF MA	L.F.

A. PERSONAL DETAILS

UNDERGRADUATE APPLICATION FORM FOR ECONOMIC PAYING FEE CANDIDATES

This form should be completed in **BLOCK LETTERS** and returned together with the required attachments to the **Registrar, University of Malawi, P.O. Box 280, Zomba, Malawi.**

Attach your passport size photo here

INCOMPLETE APPLICATIONS SHALL NOT BE PROCESSED!

1.	Surname:	First N	lame:	Initials:	
2.	Date of Birth:	/ Sex: M	F Nationality:		
	Home District:	T/A:	V	illage:	
3.	Contact Address:				
	 Tel:	Mobile:	Email:		
4.	Next of Kin – Address:				
	Tel:	Mobile:	Email:		
B.	CHOICE OF PROGRAMM	1ES (Choose three (3) programmes by	writing progamme names and cc	des in spaces provided	
1 st (Choice		-	Code	
2 nd	Choice			Code	
3 rd	Choice			Code	
~					

C. QUALIFICATIONS RECORD

i. High/Secondary school (Fill in the gaps below with the relevant information)

1 st Attempt Grades		2 nd Attempt Grades		3 rd Attempt Grades	5
Year:	Year:		Year:		
Qualification:		Qualification:		Qualification:	
Centre name:		Centre name:		Centre name:	
Centre #:		Centre #:		Centre #:	
Candidate #:		Candidate #:		Candidate #:	
Subject (Highest to Lowest)	Grade	Subject (Highest to Lowest)	Grade	Subject (Highest to Lowest)	Grade
1.		1.		1.	
2.		2.		2.	
3.		3.		3.	
4.		4.		4.	
5.		5.		5.	
6.		6.		6.	
7.		7.		7.	
8.		8.		8.	

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ii. Have you ever been registered as a student of the University of Malawi before or any other comparable institution elsewhere?

Programme: _____ Institution: _____ If yes, when:

Reason for leaving your previous institution: _____

D. CANDIDATES WITH SPECIAL NEEDS

State any physical impairment you have and any special assistance/facilities that you require: _____

E. APPLICATION FEE

All applicants are STRICTLY required to DEPOSIT a nonrefundable application fee of K25, 000.00 for Malawians and U\$35.00 for international applicants to the following bank account:

NATIONAL BANK OF MALAW	
Account Name Chanco Sundry Income	
Account Number	282553
Branch Zomba Branch	
Swift Code	NBMAMWMW
Sort Code/Branch	006
Code	008

Note: A copy of the deposit slip bearing the name of the applicant should be attached to the application form.

F. SUBMISSION OF APPLICATION FORM

A duly completed application form together with a bank deposit slip showing the name of the candidate and any other relevant attachments should be sent to the address given below and not to any constituent/affiliate College of the University of Malawi.

The Registrar	
University of Malawi	
P.O. Box 280	
Zomba	

THE CLOSING DATE FOR RECEIVING APPLICATIONS IS MONDAY, 31ST JULY, 2023

G. CHECKLIST

ITEM

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I confirm that I have duly completed all the relevant sections of this application form and attached the following supporting documents:	
1. Copies of all my relevant degrees/diplomas/certificates/academic transcripts duly certified by a commissioner of oaths	
2. Original proof of availability of funds to finance my training i.e. official sponsorship letter or applicants bank statement(s)	
3. Copy of a bank deposit slip showing the name of the applicant and proof of payment of an appropriate application fee.	
4. Curriculum vitae (CV) with names and contact details of three traceable referees.	
5. A clear specification of a programme applied for as well as the candidate's preferred mode of its delivery	
6. Official reference letter(s) from the current and/or previous employer(s) showing proof of at least 2 years work experience.	

H. DECLARATION

1		hereby
certify that all the information given on this form is true.		
Signature:	Date:	

INCOMPLETE APPLICATIONS WILL BE DISQUALIFIED!