



UNDERGRADUATE APPLICATION FORM FOR ECONOMIC 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, Central Africa.**

**INCOMPLETE APPLICATIONS SHALL
NOT BE PROCESSED!**

Attach your
passport size
photo here

A. PERSONAL DETAILS

1. Surname: _____ First Name: _____ Initials: _____

2. Date of Birth: ____/____/____ Sex: M F
Nationality: _____

Home District: _____ T/A: _____ Village: _____

Contact Address: _____

Tel: _____ Mobile: _____

Email: _____

3. Next of Kin Address: _____

Tel: _____ Mobile: _____

Email: _____

B. **CHOICE OF PROGRAMMES** (Choose three (3) programmes by writing programme names and codes in spaces provided)

1st Choice		Code	
2nd Choice		Code	
3rd 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
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.	

D. CANDIDATES WITH SPECIAL NEEDS

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

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E. APPLICATION FEE

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

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

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 FRIDAY, 15TH JULY, 2022

G. CHECKLIST

ITEM	
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.	

H. DECLARATION

I _____ hereby
certify that all the information given on this form is true.

Signature: _____ Date: _____

INCOMPLETE APPLICATIONS WILL BE DISQUALIFIED!