

UNDERGRADUATE APPLICATION I CERTIFICATE, DIPLO Please tick the type of programme	OMA AND DEGREE PROGRAMMES		Attach your passport size
a. Diploma []b. Economic Fee Paying []c. Extended Degree Programme []	d. Mature and Upgrading Programme. Open Distance and e-Learning [] f. Certificate []		photo here
PERSONAL DETAILS . Surname:	First Name:		Initials:
. Date of Birth: / /	Sex: M [] F [] Nationality:		
	T/A:		
	_Email:		
. Next of KinAdo	lress:		
el:Mobile:	Email:		
. Name and Address of Sponsor			-
el:Mobile:	Email:		
A. PROGRAMME APPLIED FOR			
1st Choice	2nd Choice	3 rd Choice	
		1	
B. QUALIFICATIONS RECORD (Tick/Indi Strictly attach original academic transc	<i>cate appropriately)</i> ript(s) and copy(s) of certificate(s)/stateme	ent of result(s) o	luly certified by a District
Commissioner or any Commissioner of	, ,	2 20 1 22 20 3 (0)	,
i Dograa/Dinlama			
i. Degree/Diploma:			
School / Poord	V	r Obtained	
School/ Board:	rea	i Oblainea	

ii. High/Secondary school (Fill in the gaps below with the relevant information): MSCE [] IGCSE []

1 st Attempt Grades		2 nd Attempt Grades		3 rd Attempt Grades	
Year:		Year:		Year:	
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.	

iii. C	Other Relevant Qualifica	tions				
			_Year	School/Board		
inst	iv. Have you ever been titution elsewhere?	registered as a studer	nt of any pul	blic University before or a	ny other comparable	
	If yes, when:	Programme:_			Institution:	
	Reason for leaving your	r previous institution: _				
C.	CANDIDATES WITH S	SPECIAL NEEDS				
Stat	e any physical impairmen	t you have and any spe	ecial assistan	ce/facilities that you require	2:	

D. APPLICATION FEE

E. SUBMISSION OF APPLICATION FORM

All applicants are <u>STRICTLY</u> required to <u>DEPOSIT</u> a non- refundable application fee of K15,000.00 for Malawians and U\$25.00 for international applicants to the bank details provided below. All relevant attachments and a duly filled in application form should be sent to the address given below: All applicants are being requested to indicate their names on deposit slip.

Bank Name	National Bank of Malawi
Account Name	Polytechnic Revenue Account
Account Number	737461
Branch	Chichiri Branch
SWIFT CODE	NBMAMWMW
SORT CODE/BRANCH CODE:	003

The Registrar
MUBAS
Admissions Office
Private Bag 303
Chichiri, Blantyre 3

F. CHECKLIST

ITEM	✓
I confirm that I have duly completed all the relevant sections of this application form and attached the following supporting documents:	
1. Certified copies of all my relevant diplomas/certificates/academic transcripts/Statement from MANEB	
2. Original proof of availability of funds to finance your 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. Official reference letter(s) from the current and/or previous employer(s) showing proof of work experience (if necessary to this application.)	

G. DECLARATION

I	hereby cer	tify that all the
information given on this form is true.		
Signaturo	Dato	

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED!