



UNDERGRADUATE APPLICATION FORM FOR NON -RESIDENTIAL DIPLOMA AND DEGREE PROGRAMMES

Please tick the type of programme applied for:

- a. Diploma [] d. Mature and Upgrading Programme []
 b. Economic Fee Paying [] e. Open Distance and e-Learning []
 c. Extended Degree Programme []

Attach your
passport size
photo here

PERSONAL DETAILS

1. Surname: _____ First Name: _____ Initials: _____
 2. Date of Birth: ____ / ____ / ____ Sex: M [] F [] Nationality: _____
 3. Home District: _____ T/A: _____ Village: _____
 4. Contact Address: _____
 Tel: _____ Mobile: _____ Email: _____
 5. Next of Kin _____ Address: _____
 Tel: _____ Mobile: _____ Email: _____
 6. Name and Address of Sponsor _____
 Tel: _____ Mobile: _____ Email: _____

A. PROGRAMME APPLIED FOR

1st Choice	2nd Choice	3rd Choice

B. QUALIFICATIONS RECORD (Tick/Indicate appropriately)

Strictly attach original academic transcript(s) and copy(s) of certificate(s)/statement of result(s) duly certified by a District Commissioner or any Commissioner of Oaths.

i. Degree/Diploma: _____

School/ Board: _____ Year Obtained _____ 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 (<i>Highest to Lowest</i>)	Grade	Subject (<i>Highest to Lowest</i>)	Grade	Subject (<i>Highest to Lowest</i>)	Grade
1.		1.		1.	
2.		2.		2.	
3.		3.		3.	
4.		4.		4.	
5.		5.		5.	
6.		6.		6.	
7.		7.		7.	

iii. Other Relevant Qualifications

_____ Year _____ School/Board _____
 _____ Year _____ School/Board _____

iv. Have you ever been registered as a student of any public University before or any other comparable institution elsewhere?

If yes, when: _____ Programme: _____ Institution: _____

Reason for leaving your previous institution: _____

C. CANDIDATES WITH SPECIAL NEEDS

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

D. APPLICATION FEE**E. SUBMISSION OF APPLICATION FORM**

All applicants are STRICTLY required to DEPOSIT 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 certify that all the information given on this form is true.

Signature: _____

Date: _____

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED!