Attach your passport size

photo here



UNDERGRADUATE APPLICATION FORM FOR MATURE ENTRY CANDIDATES

This form should be completed in **BLOCK LETTERS** and returned together with the required attachments to the **University Registrar**, **University Office**, **P.O. Box 278**, **Zomba**, **Malawi**, **Central Africa**.

INCOMPLETE APPLICATIONS SHALL NOT BE

NOTE: CANDIDATES WHO WERE PREVIOUSLY WITHDRAWN FROM THE UNIVERSITY OF MALAWI OR ANY COMPARABLE INSTITUTION ON ACADEMIC GROUNDS AND THOSE ALREADY REGISTERED WITH THE UNIVERSITY OF MALAWI OR ANY COMPARABLE INSTITUTION AS GOVERNMENT OR SELF-SPONSORED STUDENTS ARE NOT ELIGIBLE FOR ADMISSION

A. PERSONAL DETAILS

1.	Surname:			First Name:		Initials:
2.	Date o		///			F
	-					Village:
3.	Contact Address:					
	Tel: Email:			Mobile:		
4.	Next		of		Kin	_
				Mobile:		
В.	PROGRA		ED FOR (Use the abbreviated c	odes provided under Section	n J of this application	n form.)
	o gramme: me					Cod e
C.	QUALIFIC	ATIONS RE	CORD (Tick/Indicate appropri	iately)		
			emic transcript(s) and copy(s) nissioner of oaths.	of certificate(s)/statemen	t of result(s) duly c	certified by a district
i.	Degree:					
	School/E	Board:				
ii.	Other <u>Re</u>	<u>elevant</u> Qua	lifications			
					Year	School/Board
					Year	School/Board

Year	School/Board
i cai	School/Doard

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

If yes, when: _____ Programme: _____ Institution:

Reason for leaving your previous institution:

D. CANDIDATES WITH SPECIAL NEEDS

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

E. EMPLOYMENT RECORD (attach a reference letter from each employer given below)

Name of Employer	Post Held	Dates	
Name of Employer (start with the recent employer)	Post Held	From	То

F. APPLICATION FEE

All applicants are STRICTLY required to DEPOSIT a nonrefundable application fee of K11, 000.00 for Malawians and U\$25.00 for international applicants to the following bank account:

	NATIONAL BANK OF MALAWI
Account Name	UNIMA Revenue Account
Account Number	1002239236
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.

H. CHECKLIST

G. 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 University Registrar
University Office (Admissions
Office)
P.O. Box 278
Zomba

THE CLOSING DATE FOR RECEIVING APPLICATIONS IS FRIDAY, 22nd JUNE, 2018

	EM	\checkmark		
I confirm that I have duly completed all the relevant sections of this application form and attached the following supporting				
documents:				
	Copies of all my relevant degrees/diplomas/certificates/academic transcripts duly certified by a commissioner of e			
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.	Official reference letters one of which is from a Registered Architect or other allied Registered professionals showin	g proof of at		
	least 1 year work experience working under his/her supervision			
I.	DECLARATION			
۱		hereby certify		
tha	t all the information given on this form is true.			

Signature: Date:

INCOMPLETE APPLICATIONS WILL BE DISQUALIFIED!

J. PROGRAMME INFORMATION AND ENTRY REQUIREMENTS

I. Minimum entry requirements

- a. A Bachelor of Science degree in Architectural Studies from University of Malawi **or** from any accredited university or a recognized Institution of higher learning.
- b. A minimum of 1 year relevant work experience.