



Malawi College of Health Sciences

Insert your
passport size
photo here

APPLICATION/REGISTRATION FORM

- 1 Surname:** **First Name (s):**
- 2 Date of Birth:** **Age:**
- 3 Sex:** **Marital Status:**
- 4 District:**..... **Home Village:**..... **T.A:**
- 5 Contact Phone Number (s):**
- 6 Contact Address:**

- 7 Academic Qualification (s):** MSCE, GCE, or Other (Please Specify)
- Certificate No:**
- Year Obtained:** **School:**
- Postal/Physical address:**

8	<u>Subjects Taken</u>	<u>Grade</u>	<u>Subjects Taken</u>	<u>Grade</u>
	English	.....	Physical Science	.....
	Mathematics	.....	.....	.....
	Biology	.....	.....	.....
	Physics	.....	.....	.....
	Chemistry	.....	.....	.....
	Geography	.....	.....	.....

An aggregate of Best Six Subjects including English:

- 9 Professional Certificate:**..... **Year Obtained:**.....
College:
- 10 Occupation:** **Current employer:**

Note: 9 & 10 should be filled by only those applying for Mature Entry programme

11 Course of Admission at Malawi College of Health Sciences

Tick the appropriate programme:

Bachelor of Science in Clinical Medicine (Generic Programme)

Bachelor of Science in Clinical Medicine (Mature Entry)

Bachelor of Science in Nursing & Midwifery (Upgrading)

Certificate/Diploma in

12 How do you intend to pay for school fees? (Circle the appropriate option)

- Parents/Guardians
- Self
- Sponsor (name of sponsor
- Any other: Specify

13 Information for Next of Kin:

- a. Name:
- b. Relationship to Applicant:
- c. Contact Number:
- d. Postal Address:
.....
- e. Occupation:

14 Checklist for Essential Documents (Before submitting your application, check all the requirements)

S/N	Relevant Documents	Please tick
1	An application letter	
2	Curriculum Vitae	
3	Copy of MSCE or Equivalent	
4	Copy of bank deposit slip	
5	Copy of Professional Certificate (s)	
6	Copy of Professional Body Registration	

Note: 5 & 6 are requirements for mature entry candidates

15 I (full names) do hereby declare that the information I have provided above is true and correct. I also declare that I have checked and verified all the requirements and I qualify for the chosen course (s) and realise that a false declaration could lead the College to **defer and/or withdraw** my recruitment.

Signature: **Date:**

Official Use Only

Checklist of Essential Documents

Relevant Documents	Please Tick	COMMENT
Identity Card		
MSCE, GCE		
Professional Certificate		
Regulatory Body Registration		
Letter of release/support from employer		
Copy of Bank Deposit slip		
General Comment (Qualifying/Not Qualifying)		

Course, MSCE Grades and all relevant documents Certified by:

Name: **Signature:**

Date:

Course, MSCE Grades and all relevant documents Verified by:

Name: **Signature:**

Date: