



Insert your passport size photo here

Malawi College of Health Sciences

REGISTRATION FORM (UPGRADING STUDENTS)

- 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:**

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

An aggregate of Best Six Subjects including English:

- 9 **Professional Certificate:**..... **Year Obtained**
- College:**

- 10 **Occupation:** **Current employer:**

11 Course of Admission at Malawi College of Health Sciences

Diploma

Would you wish to be redirected? Please tick: YES **NO**

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

- a. Parents/Guardians
- b. Self
- c. Sponsor (name of sponsor))
- d. 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 Professional Certificate (s)	
5	Copy of Professional Body Registration	
6	Letter of release/support from Employer	
7	Copy of a bank deposit slip	

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: