- P.O. Box 1376
 Golden Peacock Shopping Mall
 City Centre, Lilongwe, Malawi
- University of Hebron-UHB
- @uhbuniversity
- Universityofhebron



: +265 993 377 888

: info@uhb.ac.mw: admissions@uhb.ac.mw

: www.uhb.ac.mw

APPLICATION FORM FOR POSTGRADUATE PROGRAMME

A. STUDENTS DET	AILS							
Surname	First Name							
Middle Name	Female Male							
Marital Status			Country: ZIP/CAP/Postcode:					
				T/A:				
Street Address:		Village:						
Date of Birth:	Place of Birth:							
Contact Address:								
Phone Number: Cell	II		Home:	Office:				
Email:								
B. ACADEMIC DETAILS								
UNIVERSITY / COLLEGE	Date you attended		Programme	Qualification	Date of Award	Class of Award		
	From	То						
PROFESSIONAL AND	O OTHER Q	UALIFICAT	TIONS					
UNIVERSITY / COLLEGE	Date you attended		Programme	Qualification	Date of Award	Class of Award		
	From	То						

B. WORK EXPERIENCE

		Programme Position / Nature of	Work
From	То		
	EQUIREMENTS		
Please give d	etails of any physi	ical or other disabilities which may require special arrangements or facil	ities.
FINANCIAL	SUPPORT		
Mho will bay		ne name of the institutions, etc, or put "self"	
viio viii pay	your rees: Give tr	ie name of the institutions, etc., or put sen	
NOTF: For se	f-sponsored stude	ents please attach a bank statement as proof of capacity to pay for yours	self Those
	·	nclude a letter of commitment from sponsor.	3611. 111036
J special			
. MOTIVATIO	ON FOR APPLYING	G FOR THIS PROGRAMME	
Vrite a 500 w	ords essay briefly	explaining why you want to pursue this Postgraduate Programme. Also	include t
esearch area	you want to purs	sue with a brief concept note. (Use a separate sheet for this and attach it	to this for
	ON CHECKLIST		
. ADDLICALI	ON CHECKLIST		
APPLICATI			CHECK
F. APPLICATI		ITEM	
	npleted all relevant	sections of this form?	
Have you con			
Have you cor Have you der form?	posited an appropri	sections of this form? Tate application fee and attached a deposit slip bearing your name to this	
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STUDY DETAILS Programme applying for:							
C. ENTRY REQUIREMENTS All candidates should attach pho DO NOT SEND ORIGINAL COPIE	otocopies of their certificates or notifi	cation of results.					
		counts: University of Hebron, Standard Bank, Acc No. 0001006269687, City Centre Branch.					
I provided about my educationa	al qualification and job experience is I me from the program at any time.	e. I understand that if at any time the information found to be incorrect or misrepresented, the I further understand that if my application is					
Kin / Guardian Details							
	Full Name; Cell:						
Company / Organisation:							
Address:							
Email:							
How did you know about University of Hebron (UHB) / Programmes?							
Social Media	Reference Groups	Other Channels					
Facebook	Family	Television ad					
Instagram	Friends	Radio ad					
Twitter	Institution	University of Hebron Website					
What is your expectation with the University?							
Student Signature							
Student Signature							
Signature:		Date:					
For office use							
Academic year: Application No:							
Receipt No:	Receipt No: Application No:						
Application Review Date (By University Admission Committee):							
Date Approved:	Date Approved: Student No:						
Signature:							
Vice Chancellor		Registrar					