



MALAWI UNIVERSITY OF SCIENCE AND TECHNOLOGY

POSTGRADUATE PROGRAMMES

APPLICATION FORM

FOR OFFICE USE ONLY
ENTRY YEAR
APPLICATION No.
RECEIPT No.

PROGRAMME:.....

This form should be completed in Block letters and returned with a non-refundable application fee of K10,000 or US\$ equivalent for Malawians and citizens of SADC member states while all other international students will pay US\$50, to:

University Registrar  
 Malawi University of Science & Technology,  
 P.O. Box 5196  
 Limbe, MALAWI  
 Tel: 01 478 0000  
 Email: [admissions@must.ac.mw](mailto:admissions@must.ac.mw)

1. PERSONAL DETAILS

Surname/Family Name: .....

Other Names: .....

Title: Mr/Mrs/Miss/Ms/Rev./Others: .....

Marital Status: .....

Maiden Name (if applicable): .....

Date and Place of Birth: .....

Nationality: .....

Country of Residence: .....

Gender: Female:  Male:

Address for correspondence: .....  
.....  
.....  
.....

Telephone Number: .....Cell: .....Fax: .....

Email Address: .....

Permanent Address if different: .....

.....  
 .....  
 .....

**2. STUDY DETAILS**

Programme being applied for: \_\_\_\_\_

Method of study (Select one option: Full-time/Part-time

**3. ACADEMIC QUALIFICATIONS**

UNIVERSITY/ COLLEGE	Date you attended		Programme	Qualification	Date of Award	Class of Award
	From	To				

**4. PROFESSIONAL AND OTHER QUALIFICATIONS**

UNIVERSITY/ COLLEGE	Date you attended		Programme	Qualification	Date of Award	Class of Award
	From	To				

**Note:** Applicants should attach certified copies of degree or equivalent and/or qualification certificates and, where applicable, a transcript of their academic record.

**5. WORK EXPERIENCE**

Please give details of your work experience with most recent first

Dates		Name of Organization	Position/Nature of work
From	To		


**6. SPECIAL REQUIREMENTS**

Please give details of any physical or other disabilities which may require special arrangements or facilities.

.....  
 .....

**7. FINANCIAL SUPPORT**

Who will pay your fees? Give the name of the institutions, etc, or put "self"

.....

**NOTE:** For self-sponsored students please attach a bank statement as proof of capacity to pay for yourself. Those being sponsored should also include a letter of commitment from sponsor.

**8. MOTIVATION FOR APPLYING FOR THIS PROGRAMME**

Write a 500 words essay briefly explaining why you want to pursue this Postgraduate Programme. Also include the research area you want to pursue with a brief concept note. (Use a separate sheet for this and attach it to this form).

**9. BANK DETAILS**

- i) **Account Name: MUST Collections Account**  
**Account Number: 9100001063429**  
**Bank Name: Standard**  
**Branch: Limbe**  
**Swift Code: SBICMWMX**

**OR**

- (ii) **Account Name: MUST Collections Account**  
**Account Number: 1070000218137**  
**Bank Name: FDH Bank**  
**Branch: Limbe**

**10. REFEREES**

Please provide below the names, positions and addresses of two referees. (at least one should be an academic member of staff)

Name: .....

Name: .....

Position: .....  
 Address: .....  
 .....  
 Email: .....

Position: .....  
 Address: .....  
 .....  
 Email: .....

Name: .....  
 Position: .....  
 Address: .....  
 .....  
 Email: .....

**11. DECLARATION**

I certify that the above information is correct and hereby apply for admission to the \_\_\_\_\_ Programme at the Malawi University of Science and Technology.

Signed:..... Date: .....

**12. APPLICATION CHECKLIST**

ITEM	CHECK
Have you completed all relevant sections of this form?	
Have you deposited an appropriate application fee and attached a deposit slip bearing your name to this form?	
Have you attached certified copies of degree or equivalent and/ or qualification certificates and a transcript of your academic record	
Have you attached a letter of commitment from your sponsor or your bank statement as a self-sponsored student?	
Have you attached your write up on your motivation to study this programme and a concept note of the research you wish to undertake?	

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1. I certify that the candidate has submitted:
  - (a) A fully completed application form with passport size photo;
  - (b) Certified copies of certificates;
  - (c) Notification of results;

Furthermore, I have examined the submitted documents and the *candidate satisfies/does not satisfy* the minimum requirements for the programme.

Signature: .....Head of Department/Programme Coordinator

Date: .....

2. On behalf of the Selection Committee, I *recommend/ not recommend* the candidate to Senate.

Signature:..... Date: .....