

# APPLICATION FORM

Admissions Office

P.O. Box 30583, Lilongwe 3 | Email: [info@emmanueluniversity.ac.mw](mailto:info@emmanueluniversity.ac.mw)

Tel: 0880 586 982 | WhatsApp: 0998 604 410



**EMMANUEL**  
UNIVERSITY

## SECTION A: PERSONAL DETAILS *(Complete in BLOCK LETTERS)*

FIELD	YOUR RESPONSE
1. Surname	
2. First Name(s)	
3. Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
4. Date of Birth	DD/MM/YYYY
5. Nationality	
6. Home District	
7. TA/Village	
8. Church Affiliation	
9. Church Position	
10. Contact	Phone: _____, Email: _____

## SECTION B: PROGRAMME SELECTION *(Tick ONE box only)*

<b>BACHELOR PROGRAMMES:</b>	<b>CERTIFICATE PROGRAMMES:</b>
<input type="checkbox"/> Bachelor of Education – Languages	<input type="checkbox"/> Early Childhood Education
<input type="checkbox"/> Bachelor of Education – Social Sciences (History/Geography/Social Studies)	<input type="checkbox"/> Psychosocial Counselling
<input type="checkbox"/> Bachelor of Theology, Education	<input type="checkbox"/> Malawian Sign Language (MSL) <i>(In partnership with MANAD)</i>
<input type="checkbox"/> Bachelor Social Sciences in Inclusive Education	<input type="checkbox"/> Church Resource Mobilisation and Entrepreneurship
<input type="checkbox"/> Bachelor of Community Development	
<b>DIPLOMA PROGRAMMES:</b>	<b>BUSINESS COURSES (ICAM/ABMA):</b>
<input type="checkbox"/> Diploma in Primary Education	<input type="checkbox"/> Certificate in Financial Accounting.
	<input type="checkbox"/> Diploma / Accounting Technician.
	<input type="checkbox"/> Diploma in Media and Journalism Studies.

## SECTION C: STUDY MODE *(Tick ONE)*

- Day Release
- Block Release
- Weekend

**Note:** Business courses unavailable for Block Release.

**REFERRAL SOURCE** (Tick ONE box and provide details if applicable)

How did you hear about Emmanuel University?	Details Required
<input type="checkbox"/> Social Media (Facebook/Instagram/etc.)	Platform:
<input type="checkbox"/> Church/Religious Network	Church Name:
<input type="checkbox"/> School/College Counsellor	Institution:
<input checked="" type="checkbox"/> <input type="checkbox"/> Friend/Family Referral	Name: _____ Contact: _____
<input type="checkbox"/> Radio/Newspaper	Station/Publication:
<input type="checkbox"/> Other (Specify)	

**SECTION D: ACADEMIC QUALIFICATIONS** (Attach certified copies of certificates)

Examination	Year	English Grade	Other Credits (List Subjects)
MSCE/IGCSE			

*Entry Requirements:*

- **Bachelor's:** 6 credits (Including English)
- **Diploma:** 4 credits (Including English)
- **Certificate:** MSCE/equivalent

**SECTION E: SPONSORSHIP DETAILS**

Sponsor Type	Details
<input type="checkbox"/> Self-Sponsored	N/A
<input type="checkbox"/> Church/Organization	Name: _____ Contact: _____
<input type="checkbox"/> Guardian	Name: _____ Contact: _____

**SECTION F: CHECKLIST & DECLARATION****Attach:**

- MSCE/Equivalent Certificate
- Church Membership Proof (Signed/Stamped)
- MK20,000 Application Fee Deposit Slip (**Acc. name:** Emmanuel University, **Bank name:** FDH Bank, **Acc.#:** 1970000272027, **Branch:** City Center, **Acc. Type:** Current Account)

**Fees Summary:**

- **Bachelor's:** MK635,000 (Generic) / MK600,000 (Weekend/Block)
- **Diploma:** MK520,000 (Generic) / MK480,000 (Weekend/Block)
- **Certificate:** MK350,000

**Declaration:**

*I certify that all information provided is accurate.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Submission Options**

1. **Email:** [info@emmanueluniversity.ac.mw](mailto:info@emmanueluniversity.ac.mw)
2. **WhatsApp:** 0998 604 410
3. **In-Person:** Emmanuel University Campus, Area 43 in Lilongwe

**DISCLAIMER:** No agent/Airtel Money/Mpamba transactions. Official payments only via FDH Bank.