



APPLICATION FOR ADMISSION- CERTIFICATE AND DIPLOMA (OPEN DISTANCE LEARNING)

Complete this Application Form and send it to: **The Registrar, The Zambia Catholic University**, P.O. Box 260410 Kalulushi, Zambia. Enclosed should be proof of deposit of a **non-refundable application processing fee of ZMK 150.00 payable to THE ZAMBIA CATHOLIC UNIVERSITY – BARCLAYS BANK A/C 009 133 1217**

1.0 SECTION ONE: PERSONAL DATA (please type or print)

1.1	SURNAME	FIRST	INITIAL	PASSPORT/NRC No.
1.2	HOME ADDRESS		TELEPHONE	FAX
1.3	EMERGENCY CONTACT		TELEPHONE	FAX
1.4	Date of Birth	Gender (M) (F)	Marital Status	Disability
1.5	Citizenship (Country)		Religious Affiliation	Clergy & Religious

2.0 SECTION TWO: ACADEMIC DATA

**2.1 LIST ALL HIGH (SECONDARY) SCHOOL ATTENDED:
ALSO: PROFESSIONAL QUALIFICATIONS**

NAME	ADDRESS	MONTH-YEAR	TO	MONTH-YEAR
NAME	ADDRESS	MONTH-YEAR	TO	MONTH-YEAR
NAME	ADDRESS	MONTH-YEAR	TO	MONTH-YEAR

**PLEASE ENCLOSE PHOTOCOPIES OF ALL TRANSCRIPTS
PLUS TWO PASSPORT SIZE PHOTOS**

3.0 SECTION THREE: ACADEMIC PREFERENCE

3.1 Certificate and Diploma courses on offer; indicate **first, second** and **third choices**.

CERTIFICATE COURSES

Certificate - Zambia Institute of Marketing

Certificate - Food Security and Governance

Certificate – Justice and Peace

Certificate - Social Policy Analysis.....

Certificate - Leadership, Governance and Management

DIPLOMA COURSES

Diploma in Teaching Methodology

Diploma- Zambia Institute of Management

Post graduate Diploma - Zambia Institute of Marketing.....

3.2 NOTE WELL: Courses in **SOCIAL TEACHINGS OF THE CHURCH, ETHICS,** and **INFORMATION TECHNOLOGY** are compulsory for all students.

4.0 SECTION FOUR: DECLARATION BY APPLICANT

By signing this application I confirm that the information given is correct and that any misrepresentation of the facts on this application could be cause for refusal of admission or a suspension from the university if discovered after enrolment.

Print Student's Name

Student's Signature

Date

5.0 SECTION FIVE: FOR OFFICIAL USE

5.1 This Applicant is: **RECOMMENDED – NOT RECOMMENDED** For admission to The Zambia Catholic University

Signature of the Registrar or official designated representative

University Stamp
Signature

Date