

1. From the **FIRST PAGE** please choose and indicate the programmes for which you wish to be considered in order of preference below.

First choice.....

Second choice.....

2. Sex: Male Female

Marital Status: Married Single Divorced Separated Widow

Date of Birth:

Nationality:

National Registration Card No. / /

OR

Passport No. for none Zambians:

3. Residential Address:

4. Last Secondary /Institution Attended
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5. Name, Address and Telephone Number(s) of next of kin
.....

6. Your Telephone Number(s) if any: Business Telephone:
Telephone: Mobile /Cellular Phone: Email Address (if any).....

7. If you have been previously enrolled as a Student at Eden University. Indicate your:
Student /Computer Number:
Program):
Year Last Enrolled:

(Please attach a transcript of your last examination results if you have been previously enrolled at any University).

Are you currently engaged in any studies? Yes No

If yes, state the nature and type of studies and qualifications sought, including examining body.

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8. Do you have any physical or communication disabilities? Circle the number applicable.

- a. 1. Vision
- 2. Mobility
- 3. Speech
- 4. Hearing
- 5. Others

b. If you have any disability, give details

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9. 'O' level or equivalent examinations passed and grades attained in each subject.

Subject	Grades Names of Examination Board
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Enclose certified copy (ies) of statement(s) of results and certificates, application forms which are not accompanied with copies of statements of results will not be processed.

10. FILL THIS PART IF YOU ARE PRESENTLY EMPLOYED

- f) Type of Employment or Job:
- g) Name of Employer:
- h) Address of Employer:
- i) Period of Service:
- j) e. TS/Employee's Reference No:

11. How did you know about us? Please tick your answer;

- Through a radio station
- From our posters/ flyers
- From our Zambian News Papers
- Through our television adverts
- From our billboards
- From one of our students

Signature of applicant: Date:

Note: All Degree application forms are sold at K100. Application forms obtained from our website should be paid for in the Institutional A/c number: 0014932720004 Finance Bank Corporate Branch.

Official Use Only
SCHOOL OF EDUCATION /HEALTH SCIENCES' RECOMMENDATION
Accept /Reject and Reasons for Rejection

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