

UNDERGRADUATE ELECTRONIC APPLICATION FORM*(Complete in CAPITAL LETTERS)***THIS SECTION SHOULD BE COMPLETED BY MILLENNIUM UNIVERSITY REPRESENTATIVE****APPLICATION NUMBER:**.....**REQUEST THIS NUMBER FROM ADMISSION OFFICE BEFORE COMPLETING THIS APPLICATION FORM****Applications without this number will NOT be processed. This number helps to you to track the application during processing.**

Counselled by: Name _____ Sign: _____ Date: _____

Tick the Appropriate Box belowMode of Study: Fulltime ☐ Part-time ☐Undergraduate ☐ Transfer ☐ Progression ☐

Affix Recent

Passport Size Color

Photo Here

2026

2. Applicant Details (Complete only one form per person)

First Name: _____ Middle Name: _____ Last Name: _____

Date of Birth: DD/ MM/ YYYY Gender: F ☐ M ☐ AGE NATIONAL ID/ Passport No:

Village: _____ T/A: _____ District: _____

Nationality: _____ Physical Address: _____

Postal Address: _____

Tel: Mobile: Email:

Religion: _____

*For official use by Special Needs Coordinator*Any physical disability Yes ☐ No ☐

if yes please specify: _____

3. Education DetailsSchool Level Completed: ☐ MSC ☐ IGCSE ☐ A-LEVEL ☐ AS ☐ COSC ☐ MATRIC ☐ IB ☐ Other: _____Name of School: _____ Year of Completion: _____ Total points obtained in school: Other Qualifications obtained: Certificate ☐ Diploma ☐ Bachelors ☐ Masters ☐

Name of Institution: _____ Year of Completion: _____

Have you ever been Disciplined in any school before? ☐ Yes ☐ NoIf Yes, what penalty did you receive? Tick the appropriate box: ☐ Arrested ☐ Expulsion ☐ Suspended ☐ Warning

4. Current Status

Employed: ☐ Self Employed: ☐ Unemployed: ☐ Studying: ☐

Name of Employer: _____ Position: _____

Physical Address: _____

Postal Address: _____

Tel: _____ Fax: _____ E- Mail: _____

5. Parent/ Guardian/ Next of Kin Details

Tick the appropriate box: Parent ☐ Guardian ☐ Next of Kin ☐

First Name: _____ Middle Name: _____ Last Name: _____

Village: _____ T/A: _____ District: _____

Physical Address: _____

Postal Address: _____

Tel: _____ Mobile: _____ E- Mail: _____

6. PROGRAMME APPLIED FOR

Rank the programmes below in order of preference. Note that the university reserves the right to place you in the appropriate programme.

N.B: Please refer to the back of this form for Programme Code, Programme Name and complete below.

6a. CHOICE	PROGRAMME CODE	PROGRAMME NAME IN FULL (Refer to the last page for Names & Codes)
CHOICE 1		
CHOICE 2		

6b. Details of Sponsorship

How will you be sponsored? ☐ Self ☐ HESLGB ☐ Employer Other (Please specify) _____

Name of Sponsor: _____

Place of Work: _____ Position: _____

Physical Address: _____

Postal Address: _____

Tel: _____ Mobile: _____ E- Mail: _____

7. How did you hear about Millennium University (MU)?

- | | |
|--|--|
| ☐ Letter that I received from MU | ☐ Advert of MU on TV |
| ☐ Advert of MU in Newspaper/Magazine | ☐ Advert of MU I heard on Radio |
| ☐ Poster/Banner/Billboard of MU I saw | ☐ Recommendation of a current student of MU |
| ☐ Representative of MU I met | ☐ Presentation / Open Day of MU I attended |
| ☐ Facebook/ Instagram/Twitter page promotion advert | ☐ MU website |
| ☐ Recommendation of MU Ex Student | ☐ Others Specify _____ |

8. ADDITIONAL DETAILS- Academic Record. e.g. MSCE

Qualification:

Centre Name:

Centre #:

Candidate #:

Subject (Highest to Lowest)**Grade**

1.

2.

3.

4.

5.

6.

7.

8.

9. Level of Entry**ENTRY Level AT MU****- Please Tick (✓)****SEMESTER****Tuition Times****Please Tick (✓)**

FIRST YEAR

NORMAL WEEK DAYS

SECOND YEAR

EVENING TIMES

THIRD YEAR

WEEKEND PROGRAMMES**10. DECLARATION**

I declare that the information I have provided above is correct to the best of my knowledge. I also agree to abide by Millennium University rules and regulations which are applicable to all students.

Signature:

Date:

All candidates must attach photocopies of their Certificates OR Statement of results officially stamped and National ID for locals or Passport for foreigners.

11. Non Refundable Application Fee: MK10,000 - Deposit to any of the following bank accounts - Attach deposit slip to

Account Name: Millennium University
 Bank Name: First Capital Bank
 Branch: Blantyre
 Account Number: 0003716002236

12. Contact Details

Millennium University
 P.O Box 2797
 Blantyre
 Malawi

Tel: (265) 99 775 7904
 (265) 88 468 2603

<http://www.mu.ac.mw>
admissions@mu.ac.mw

Physical Address: Old Zomba Road, Nyambadwe, Blantyre, Malawi

UNDERGRADUATE PROGRAMMES	CODE
BSc. Accounting Practice	BSACP
BA. Economics	BAEC
BSc. Finance and Banking	BSFB
BA. Human Resource Management	BAHRM
Bachelor of Business Administration	BBA
BSc. Business Information Technology	BSBIT
BSc. Social Work	BASW

Terms and Conditions:

1. This application form is issued free of charge and is **not for sale**.
2. The Applicant should however pay for the Application Fee stipulated on this form.
3. The application form remains the **property of Millennium University** and may not be photocopied, reproduced, altered, or duplicated without the University's written authorisation.
4. Millennium University **does not accept cash payments on campus** for application fees or any other admission-related charges.
5. All application fees must be **deposited directly into the Millennium University bank account** indicated on this application form.
6. Applicants should **not give money to recruitment officers, agents, or any other individual**. All payments must be made directly to the University's designated bank account.
7. Applications submitted **without proof of payment**, such as a bank deposit slip or payment receipt, will not be processed.
8. Submission of this application form does not guarantee admission. Admission depends on the applicant meeting the University's entry requirements and on the availability of space in the selected programme.
9. Millennium University reserves the right to verify all information and supporting documents submitted by applicants.
10. The University may reject any application that contains false, inaccurate, incomplete, or misleading information.
11. The University reserves the right to amend admission requirements, fees, and procedures without prior notice.
12. By submitting this application form, the applicant confirms that all information provided is true, accurate, and complete.

OFFICE USE ONLY

☐ ADMITTED

☐ DECLINED

If Admitted, kindly complete the details below

Date of Admission: _____

PROGRAMME: _____

SEMESTER: ☐