



# Evangelical Bible College of Malawi

Passionately Transforming & Equipping

P.O. Box 243, Blantyre, Malawi  
Tel: +265880432669 (Principal)  
+265886449048 (Registrar)

Email : info@ebcom-malawi.org  
Website : www.ebcom-malawi.org

**For Office use:**

Date rec'd:

Paid fee:

Result:

## STUDENT APPLICATION FORM

### INSTRUCTIONS:

You should complete Section A and B. Then take the application form to your church for Section C and D to be completed. Ensure that you enclose the completed form with the deposit slip of MK5, 000.00 and returned it to EBCoM. All payments should be made as instructed in **Section E**.

**Please attach copies** of all your JCE and MSCE certificates. If you are married you should also attach a copy of your marriage certificate. Make sure that the name you write below is the same as the name that appears on your academic and marriage certificates.

### SECTION A: To be completed by the Applicant

1. Full Name, Surname: \_\_\_\_\_ First Names: \_\_\_\_\_
2. Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_
3. Contact Address: \_\_\_\_\_  
Tel. No.: \_\_\_\_\_ Phone belonging to: \_\_\_\_\_  
Email address: \_\_\_\_\_
4. Present Local Church: \_\_\_\_\_ Denomination: \_\_\_\_\_

### FAMILY LIFE (For regular students only. If married, please attach marriage certificate)

5. Marital status (Please tick what applies to you): Married  Single  Engaged   
If married, how long? \_\_\_\_\_ Name of Spouse \_\_\_\_\_  
Name(s) and age(s) of your child(ren) if any \_\_\_\_\_  
\_\_\_\_\_

### PROGRAMMES

6. Indicate the programme you are applying for (*see prospectus for details of qualifications required*)
  - Certificate of Christian Ministry (1yr) – JCE required
  - Certificate of Biblical Studies (2 yrs) –MSCE required
  - Diploma in Theology & Christian Ministry (3 yrs) – MSCE with 4 credits including English
  - Bachelor of Theology (4 yrs generic & 2 yrs mature entry) – MSCE with 6 credits or MSCE with 4 Credits respectively and including English
  - Bachelor of Christian Ministries with Education option (4 yrs generic & 2 yrs mature entry) – MSCE with 6 credits or MSCE with 4 Credits respectively and including English



**PAST AND PRESENT WORK EXPERIENCE WITH DATES:**

12. List all your work experience with dates up to the present \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**HEALTH**

13. Explain any medical conditions that you have and would like the college to know about.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FEES**

14. If you are applying independently (i.e. without financial sponsorship from somewhere) explain how you intend to pay the school fees.  
\_\_\_\_\_  
\_\_\_\_\_

**HOW DID YOU FIND OUT ABOUT THE COLLEGE?**

what applies: Newspaper; Television; Friends; Radio, Others (specify) \_\_\_\_\_

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**SECTION B: Referees**

Please write the name and address of **two** referees. One should be your pastor, the other a teacher or another Christian leader unrelated to you. Pass the enclosed forms to these referees.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION C: To be completed by the Sending Local Church**

Do you support this application? Please  Yes or No Date \_\_\_\_\_

**Name of Pastor:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**SECTION D: To be completed by the Sending Church Headquarters or the Sponsor (if any)**

Do you confirm your commitment to pay and meet expenses of this applicant which include: school fees, travel expenses and any allowances? \_\_\_\_\_

Completion of this form does not mean that the applicant has been accepted at EBCoM. A letter of acceptance will be sent if and when the applicant has been accepted.

Name and signature of the head of the applicant's denomination/sponsor:

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Church stamp:**

### **SECTION E: BANK DETAILS**

Bank Name : National Bank of Malawi  
Account Name : Evangelical Bible College of Malawi  
Account Type : Current Account  
Account Number : 671142  
Branch : Victoria Avenue

#### **For foreign Transactions**

Dollar Account Number : 288977

Pound Account Number : 357723

SWIFT/SORT Code : NBMAMWMW

#### **NOTES:**

1. Please make all payments including application fee through the bank details as stated above, No Cash payments shall be accepted by the college.
2. When depositing, depositor's name should be for the student the fees are being paid for, and then bring the deposit slip to the college. The college shall issue receipt for the payment after verifying that the fees have indeed been received.

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P.O. Box 243, Blantyre, Malawi

Tel: 0886 449 048 / 0880 432 669

**Email:** info@ebcom-malawi.org or registrar@ebcom-malawi.org

## Reference Form

Name of Referee: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Full Name of Applicant: \_\_\_\_\_

Please write below your assessment of the applicant, including how long you have known them, their gifts, and their conduct within the church and society.

Add any other information which you think it is important for the College to know.

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

Please send this completed form to EBCoM at the address above.

***Thank you!***

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

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***Thank you!***