



PENTECOSTAL LIFE UNIVERSITY

APPLICATION FORM-2023 ACADEMIC YEAR

MANAGEMENT STUDIES

Affix recent
passport size
distinct colored
photograph.

SURNAME _____

FIRST NAME _____

SEX: FEMALE: MALE:

MARITAL STATUS _____

DATE OF BIRTH: _____

NATIONALITY: _____

CONTACT ADDRESS: _____

TELEPHONE NUMBERS:
MOBILE _____ HOME: _____ OFFICE: _____

EMAIL ADDRESS: _____

PROGRAM APPLYING FOR: _____

PRESENT EMPLOYMENT POSITION/TITLE: _____

ACADEMIC RECORD

UNIVERSITY/COLLEGE	FROM	TO	DIPLOMAOR DEGREE AWARDED

Note: Applicants should attach copies of master's degree or its equivalent certificates, transcript of their academic record and curriculum vitae indicating three years of working experience with three traceable references from professional and academic arenas.

PLEASE INDICATE ANY BUSINESS OR MANAGEMENT COURSE(S) YOU HAVE ATTENDED IN THE LAST THREE YEARS

EMPLOYMENT HISTORY

(Attach any proof of employment engagement(s) for three years duration)

DATE		NAME OF EMPLOYER	POSITION OR TITLE	MAJOR RESPONSIBILITIES
FROM	TO			

FINANCIAL SUPPORT

Responsible entity for your tuition fees payment? Give the name of the institution(s) or self if self sponsored.

Provide below the names of three academic and professional references whom we can contact about your academic potential and job performance to pursue the Degree Completion.

A.) Academic Reference: Full Name: _____

Contact No. _____ / _____

B.) Academic Reference: Full Name: _____

Contact No. _____ / _____

C.) Professional (Employment) reference: Full

Name: _____ **Contact**

No: _____ / _____

D.) Professional (Employment) reference: Full

Name: _____ **Contact**

No: _____ / _____

PERSONAL REFLECTION

What do you consider to be your most significant achievement to date? Why is it significant to you?

Please give a frank impression of your main academic strengths and weaknesses

GENERAL INFORMATION

- a) Provide a personal statement of why you want to pursue the degree completion and how you intend to use the degree as well as research interests in not more than on page.
- b) Attach a recent passport size photo

FEES AND OTHER FINANCIAL OBLIGATIONS

- a) Tuition fees for Malawian students are MK1,900,000 per semester, for students from SADC region tuition is \$2,800 USD per semester and students from Non SADC region tuition is \$2,950 USD
- b) Non-refundable application fee of K5,500 by cheque or deposit the money into the PLU's bank accounts:
- C) Non-refundable Registration fees of K30,000 within 14 days once 50% of Tuition fees is paid.

D) Once Fees are paid, there is no refund if pulled out of the program at any point during the program course.

E) All payments should be made only to the below listed bank accounts.

1. Pentecostal Life University, Standard Bank Ltd account no. 0140031308000, Capital City Branch OR

2. Pentecostal Life University, Ecobank, Account No. 0040237002653001, Cross Roads Branch

3. Pentecostal Life University, FDH bank, Account No. 1400000053157, Old Town Branch

STUDENT DECLARATION

I declare that the above information is correct to the best of my knowledge. I understand that if at any time the information I provided about mu educational qualification and job experience is found to be incorrect or misrepresented, the University has the right to expel me from the program at any time. I further understand that if my application is rejected, the application processing fee is not refundable.

Students Signature: _____

Date: _____

FOR OFFICIAL USE ONLY

DATE APPLICATION REVIEWED BY THE UNIVERSITY ADMISSION COMMITTEE: _____

DATE APPROVED: _____

STUDENT NO: _____

SIGNED: _____

VICE CHANCELLOR

UNIVERSITY REGISTRAR

To be filled-in by Departmental Ph.D. Admission Committee

Recommended for admission:

Name & Signature of member _____ / sign _____

Signature of member _____ / sign _____

Signature of member _____ / Sign _____

a. To be filled by Institute Ph.D. Admission Committee Chairman:

(i) Verified and found suitable and recommended to Chairman of Senate for admission by: _____

(ii) Not recommended for admission, with reason(s) :

(iii) (Signature of other member(s) representative : _____

b. Admitted on approval of Chairman of Senate. _____

Name: _____

Date: _____

FORM I
SPONSORSHIP LETTER FOR FULL-TIME PH.D. PROGRAM
(Should be typed on the letter head of the sponsoring organization)

Reference No.

Date:

To: The Admissions Officer

Sub: Sponsoring an Employee for Ph.D. Program

Dear Sir,

We hereby sponsor the candidature of Mr./Ms./Mrs. _____,
Designation: _____ who is a regular employee in
our organization, for joining Ph.D. Program in the department of
_____ at your Institute as a
full-time student.

It is certified that he/she has completed two years of service in our
organization as a regular employee. He/she has gained experience in the
field(s) _____.

If selected, we shall relieve him/her from his/her duties to join the
program during the first three years of the Ph.D. Program.

(Signature and Seal of the Sponsoring Authority)