Application No.	Serial	
	Number:	
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ZIMBABWE NATIONAL DEFENCE UNIVERSITY APPLICATION FOR POSTGRADUATE ADMISSION

Please read the 'Guide to Applicants' in Section (11) BEFORE completing this form

FOR (OFFICIAL USE ONLY	Certificate Received/Verified Yes (Y) / No(N)
Date (of receipt	Masters Level
Recei	ipt	Advanced Level
Amou	unt 4	Ordinary Level
Date 1	received	Other
		Birth Certificate
		National Id
Type	e of Entry	Marriage Certificate
Norm	mal Table 1	
Specia	ial	
Matu	ure	
Repea	eat	
		Date acknowledged
		Military
APPI	LICATION AND /OR REGISTRATION	INFORMATION
1.1	Intake being applied for: March	August Year: 20
1.1 1.2	·	August Year: 20 Special Mature
	~	Special Mature
1.2	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No
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1.2	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No
1.2 1.3	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No
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1.2 1.3 PERS 2.1	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No nber:
1.2 1.3 PERS 2.1 2.2	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No
1.2 1.3 PERS 2.1 2.2 2.3	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No aber:
1.2 1.3 PERS 2.1 2.2 2.3 2.4	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No nber:/mm/yy/yy
1.2 1.3 PERS 2.1 2.2 2.3 2.4 2.5	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No aber: /mm/yy/yy
1.2 1.3 PERS 2.1 2.2 2.3 2.4 2.5 2.6	Entry type Normal Have you ever applied to and/or beer university? If yes 1.3.1 Please give date:	Special Mature n registered at this Yes No aber: /mm/yy/yy

		if oth	er; specify:	• • • • • • • • • • • • • • • • • • • •	•••••	•••••
	2.11	Natio	nality:	•••••		•••••
	2.12	Are y	ou a permanent resident of Zi	imbabwe: Yes (Y)/ No (N):	•••••	•••••
		(If N	o, what permit do you hold, if	f any (attach certified copy):	
	2.13	Period	d/ Year of residence in Zimbaby	ve		
	2.14	Religi	on:			
	2.15	Do yo	u suffer from any disability fo	or which special arrangeme	ent at the university would b	e required?
		Yes (Y)/ No (N):			
		If yes	s, please state the nature of di	sability		
	2.16	CONT	TACT DETAILS OF THE NEX	T OF KIN		
	2.16.1	Name	of Next of Kin	Teleph	one Number	
	2.16.2	The n	ext of kin in 2.16.1 is my			
	2.16.3	Conta	ct Address of Next Kin			
		•••••			•••••	
	2.16.4	Next o	of Kin's Email Address	Next of Ki	1 Cell Phone Number	
2	CON					
3.			DETAILS			
	3.1		act Address:			
	3.2		Telephone: Code:			
	3.3		Contact Tel.: Code			
	3.4		hone Number:			
	4.		DICE OF DEGREE / D			
	4.1		Choice	•••••	••••••	•••••••
	4.2	Secon	d Choice	••••••	•••••	•••••
4.	EXA	MINA	TION RESULTS			
	Date		Examination Body	Level (E.g. 'O', 'M',		
М	th	Year	(e.g. Zimsec, A.E.B., /Cam.)	'A', Scottish Higher etc)	Subject	Results/ Grade
			A.E.B., /Calli.)	Scottish Higher etc)		
	-	-				
<u> </u>						
-						
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5.	TECH	NICAL/	TERTIA	RY EDUCATION		
Year			Qualifica		Name of inst	itution
6.	FURT	HER RE	LEVANT	INFORMATION		
	6.1 Wo	rk Experie	nce			
		•				
		Date	-	 		
Mth	rom Yr	Mth	o Yr	Occupation		Name and Address Of Employer
]				
7.	PROS	PECTIVI	E SPONS	ORS		
7.1				what source do you expect t	o finance vour ctu	dies (e.g. solf lean, gyt, and
/• 1				lease state name	o imanec your stu	uics (e.g. sen, ivan, gvi, and
	•••••				••••	
	7.2	Are you a U	Iniversity St	aff Dependant (i.e. wife, husb	and, child)?	
		Yes (Y)		No (N)		
		If yes,	name	e and department of staff	member	
		Name			Department	
	7.3	Are you a Yes (Y)	University	Staff member? No (N)	\neg	
		100 (1)		1.0 (2.1)		
		If yes, plea	ase give you	ur name and department	Department	
		·			Department	
0		CD Grave	1 0003	NOD A MYCH		
8.	8.1			MODATION usidered for university accounts	mmodation?	
	0.1	Yes (Y)		No (N)	mmouanon:	

	CHE	CKLIST
		I have completed all sections of the form.
		I have enclosed certified copies of all documents.
		I have signed this form.
0.	DEC	LARATION AND UNDERTAKING
		indersigned, hereby:
	i)	Declare that to the best of my knowledge and belief the information furnished in this application form and all supporting documentation is true and correct and that if it be found to be false and misleading
		in any respect, this application will be disqualified and I will face legal charges.
	ii)	Undertake, during orientation period and for any period during which I am a registered student,
	***)	to be bound by the rules and regulations of the University.
	iii) iv)	Undertake to pay unconditionally all fees and charges payable to the University as they fall due for payment. Acknowledge that the University does not accept responsibility for any damage or loss
	14)	suffered while I am or as a consequence of my being a student of the University.
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·s····		application and the state of th
1.	GUII	DE TO APPLICANTS
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(DA)	777 A 3777 31	OTEC TO ALL ADDITIONS
MРОІ	RTANT N	TOTES TO ALL APPLICANTS
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Full Name

Signature

Date