



# MALAWI COLLEGE OF ACCOUNTANCY

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## APPLICATION FORM: 2019 – 2020 ACADEMIC YEAR

### A. PERSONAL DETAILS

i. Surname \_\_\_\_\_ First Name \_\_\_\_\_ Initials \_\_\_\_\_

ii. Sex: Female  Male  iii. Date of Birth  iv. Nationality

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

Tel: \_\_\_\_\_ Mobile \_\_\_\_\_ Email: \_\_\_\_\_

v. Next of Kin Address \_\_\_\_\_

Tel: \_\_\_\_\_ Mobile \_\_\_\_\_ Email: \_\_\_\_\_

### B. ACADEMIC DETAILS

i. Programme Applied For \_\_\_\_\_

Mode of Study: Full Time..... Weekend..... Evening.....

(a) MSCE  O-Level  A-Level  Other

(b) Year Obtained \_\_\_\_\_ Name of School(s) \_\_\_\_\_

ii. Other Year(s) of Re-sit (if grades were accumulated) Yr(s) \_\_\_\_\_ and \_\_\_\_\_

iii. Subjects Written and Grades obtained (best 6).

1st Attempt		2nd Attempt		3rd Attempt	
Subject	Grade	Subject	Grade	Subject	Grade
_____	___	_____	___	_____	___
_____	___	_____	___	_____	___
_____	___	_____	___	_____	___
_____	___	_____	___	_____	___
_____	___	_____	___	_____	___
_____	___	_____	___	_____	___

### C. COMMITMENT FROM SPONSOR

NAME: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

**D. HOW DID YOU LEARN ABOUT MCA AND THIS PROGRAMME (Tick all that apply)**

- 1). Newspaper      2) Radio advert      3) TV      4) Word of Mouth/Heard from a friend

**iv. Other Qualifications other than O-Levels**

**Qualification:** \_\_\_\_\_ **School** \_\_\_\_\_ **Year** \_\_\_\_\_

Subject	Grade	Subject	Grade	Subject	Grade
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Only candidates who re-sat their MSCE examinations in one, two, three or four subjects and all IGCSE, AS-Level, A-Level, NSC and IB candidates should attach photocopies of their certificate or notification of results.

**DO NOT SEND THE ORIGINAL COPY OF YOUR CERTIFICATE.**

Please state any disability you have \_\_\_\_\_

*I certify that the information given above is true and it is to the best of my knowledge.*

**Signature:**..... **Date:**.....

**FEES:** Deposit a Non-Refundable Application Fee of **K7,500.00** to either of the following Bank Accounts: **Bank Name:** National Bank of Malawi. **Branch:** Chichiri Branch **Account Name:** Malawi College of Accountancy: **Account No.** 695696. **Bank Name:** National Bank of Malawi. **Branch:** Capital City Branch **Account Name:** Malawi College of Accountancy: **Account No.** 1040545. **One copy of the deposit slip should be attached to the application form to serve as proof of payment.**

PROGRAMME INFORMATION PROGRAMME	DURATION	ABREV	ENTRY REQUIREMENTS
<b>Faculty of Business</b>			
Bachelor of Business Management and Entrepreneurship	4 Years	BBME	Six MSCE/O-level credits including English and Mathematics
Bachelor of Applied Accounting: Auditing and Information Systems.	4 Years	BAA-AIS	Six MSCE/O-level credits including English and Mathematics
Bachelor of Management of Information Systems	4 Years	BMIS	Six MSCE/O-level credits including English and Mathematics
Bachelor of Marketing and Public Relations	4 Years	BMPR	Six MSCE/O-level credits including English and Mathematics
Bachelor of Banking and Financial Services Management	4 Years	BBFSM	Six MSCE/O-level credits including English and Mathematics
Bachelor of Human Resources Management and Industrial Relations	4 Years	BHRM	Six MSCE/O-level credits including English and Mathematics