



UNIVERSITY OF ESWATINI

UNDERGRADUATE APPLICATION FORM

STUDENT ID <input style="width: 90%;" type="text"/>	OFFICE USE ONLY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">CHECKED BY <input style="width: 90%;" type="text"/></td></tr> <tr><td style="padding: 2px;">CODED BY <input style="width: 90%;" type="text"/></td></tr> <tr><td style="padding: 2px;">ENTERED BY <input style="width: 90%;" type="text"/></td></tr> <tr><td style="padding: 2px;">CHECKED BY TUTOR <input style="width: 90%;" type="text"/></td></tr> </table>	CHECKED BY <input style="width: 90%;" type="text"/>	CODED BY <input style="width: 90%;" type="text"/>	ENTERED BY <input style="width: 90%;" type="text"/>	CHECKED BY TUTOR <input style="width: 90%;" type="text"/>
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CODED BY <input style="width: 90%;" type="text"/>						
ENTERED BY <input style="width: 90%;" type="text"/>						
CHECKED BY TUTOR <input style="width: 90%;" type="text"/>						

APPLICATION FOR ADMISSION (2021/2022)

COMPLETE ALL SECTIONS IN INK AND RETURN TO THE *ADMISSIONS SECRETARY, UNIVERSITY OF ESWATINI* OR EMAIL TO applications@uniswa.sz BEFORE **26th MARCH, 2021**.

AN APPLICATION FEE OF E530.00 FOR ESWATINI CITIZENS AND A FEE OF E580.00 FOR NON-SWAZI CITIZENS MUST BE DEPOSITED AT THE BANK. THE APPLICATION FEE IS NON-REFUNDABLE.

SHOULD YOU WISH TO CHANGE YOUR INTENDED PROGRAMME OF STUDY AFTER HAVING SUBMITTED THE APPLICATION FORM. THE CHANGE SHOULD BE EFFECTED BEFORE THE CLOSING DATE FOR SUBMISSION OF APPLICATIONS. EACH CANDIDATE IS REQUIRED TO COMPLETE ONLY **ONE (1)** APPLICATION FORM

PERSONAL DETAILS: (USE CAPITAL LETTERS)																					
1.0 TITLE: <input style="width: 150px;" type="text"/> MR / MRS / MS / DR (Circle one)	INITIALS: <input style="width: 100px;" type="text"/>																				
1.1 SURNAME: <input style="width: 90%;" type="text"/>																					
1.2 FIRST NAME(S): <input style="width: 90%;" type="text"/>																					
1.3 GENDER: <input style="width: 150px;" type="text"/> MALE / FEMALE (circle one).																					
1.4 PERSONAL IDENTIFICATION NUMBER (PIN): <input style="width: 100px;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px; height: 20px;"></td> </tr> </table>																				
1.5 PASSPORT NUMBER (If foreign) <input style="width: 90%;" type="text"/>																					
1.6 DATE OF BIRTH: <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> / <input style="width: 20px;" type="text"/> (DAY/MONTH/YEAR)																					
1.7 MARITAL STATUS: <input style="width: 150px;" type="text"/> SINGLE / MARRIED / DIVORCED / WIDOWED (Circle one)																					
1.8 MAIDEN SURNAME: <input style="width: 90%;" type="text"/>																					
1.9 CITIZENSHIP: <input style="width: 100px;" type="text"/>	STUDENT TYPE: <input style="width: 100px;" type="text"/>																				
1.10 HOME LANGUAGE: <input style="width: 100px;" type="text"/>	PREFERRED LANGUAGE: <input style="width: 100px;" type="text"/>																				
1.11 POSTAL ADDRESS: <input style="width: 90%;" type="text"/>																					
P. O. BOX, P/BAG (Circle one) <input style="width: 150px;" type="text"/>																					
TOWN / CITY: <input style="width: 150px;" type="text"/>	COUNTRY: <input style="width: 100px;" type="text"/>																				
1.12 PHYSICAL ADDRESS: <input style="width: 90%;" type="text"/>																					
<input style="width: 90%;" type="text"/>																					
<input style="width: 90%;" type="text"/>																					
TOWN / CITY: <input style="width: 150px;" type="text"/>	COUNTRY: <input style="width: 100px;" type="text"/>																				
1.13 EMAIL: <input style="width: 100px;" type="text"/>																					
1.14 CELL NUMBER: <input style="width: 100px;" type="text"/>																					
1.15 DETAILS OF NEXT OF KIN: <input style="width: 100px;" type="text"/> PARENT / GUARDIAN / SPOUSE (Circle one)																					
1.16 FULL NAMES: <input style="width: 90%;" type="text"/>																					
1.17 POSTAL ADDRESS: <input style="width: 90%;" type="text"/>																					
1.18 CELL NUMBER: <input style="width: 100px;" type="text"/>																					

2.0 CHOICE OF PROGRAMME: (Applicants may select three (3) programmes in order of preference)

Programme (Please refer to prospectus for programmes)	Year of Study eg. 1st	Code For Office Use Only
1.		
2.		
3.		

2.2 INFORMATION OF APPLICANT

TICK

YOU APPLY AS:

- A HIGH SCHOOL LEAVER WHO HAS DONE O' LEVEL/IGCSE/EQUIVALENT.....
- A CANDIDATE WHO HAS A POST HIGH SCHOOL PROFESSIONAL QUALIFICATION
- A UNISWA STUDENT WHO FAILED IN THE PAST, LEFT UNISWA AND NOW RE-APPLIES FOR THE SAME PROGRAMME
- A UNISWA STUDENT WHO FAILED IN THE PAST, LEFT UNISWA AND NOW RE-APPLIES FOR A DIFFERENT PROGRAMME
- FINAL YEAR STUDENT (SPECIFY YOUR CURRENT PROGRAMME).....
- OTHER
- IF YOU TICKED CONDITIONS 05, OR 07, GIVE PARTICULARS (SUCH AS FORMER PROGRAMME AND ACADEMIC YEAR OF STUDY).....

01
03
05
07
08
09

3.0 SCHOOL LEAVING CERTIFICATE

NB: For Exam Type please write abbreviation of your exam name eg **SGCSE; NSC;**

NB: For Exam Date please write exam month and year eg **NOVEMBER 2020**

Exam Type:	Exam Date:
Centre No:	Candidate No:
SUBJECT	GRADE
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	

SECOND CERTIFICATE (If applicable)

Exam Type:		Exam Date:	
Centre No:		Candidate No:	
SUBJECT		GRADE	
1.			
2.			
3.			
4.			

THIRD CERTIFICATE (If applicable)

Exam Type:		Exam Date:	
Centre No:		Candidate No:	
SUBJECT		GRADE	
1.			
2.			
3.			
4.			

4. **ACTIVITY LAST YEAR** :

5. **POST HIGH SCHOOL INSTITUTIONS ATTENDED: (i.e. College,**

5.1	NAME OF INSTITUTION	PERIOD OF STUDY			QUALIFICATION
	1.		to		
	2.		to		
	3.		to		

5.2 **PRESENT OCCUPATION:**.....

NB: PRE-VOCATIONAL QUALIFICATION IS NOT RECOGNISED BY THE UNIVERSITY

- B.Ed. applicants are required to supply academic transcripts together with their application form.
- B.Nursing Science applicants are required to supply academic transcripts & current receipts of membership to the Swaziland Nursing Council together with their application form.

6. FINANCIAL PROCEDURE

1.0) Application fees should be directed to:

First National Bank of Swaziland Limited

Branch: **Matsapha**

Account Holder: **University of Eswatini**

Account Number: **57730018902**

Branch Code: **281064**

Swift Code: **FIRNSZMX**

Payment Reference:

Off-line applications – **National identity number (PIN)**

(Wrongly referenced payments will not be allocated to student accounts)

1.1) The application process shall only be completed once application fee has been paid in full.

1.2) The following waiting periods shall apply to the different methods of payments before application can be further processed:

1. Cash deposits /FNB to FNB transfers – 2 working days
2. Local Interbank EFTs – 3 working days
3. Foreign payment – 5 working days

NOTE:

- No cheque payments shall be accepted for application fees
- Application fee is non-refundable

7. PLEASE CHECK IF YOU HAVE DONE THE FOLLOWING

- a). COMPLETED ALL SECTIONS
- b). ENCLOSED APPLICATION FEE (BANK RECEIPT)
- c). ENCLOSED AN OFFICIAL COPY/COPIES OF YOUR ACADEMIC RESULTS/CERTIFICATES
- d). ENCLOSED AN OFFICIAL COPY OF YOUR NATIONAL ID

TICK
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

8. DECLARATION BY APPLICANT

I declare that all the above information is correct and true to the best of my knowledge and belief. I agree that if I am accepted by the University, I shall be liable to disciplinary control of the University authority and I undertake to conform to the rules and regulations of the University.

APPLICANT'S NAME: <input type="text"/>	
APPLICANT'S SIGNATURE: <input type="text"/>	DATE: <input type="text"/>
NEXT OF KIN NAME: <input type="text"/>	
NEXT OF KIN SIGNATURE: <input type="text"/>	DATE: <input type="text"/>