



**KAMUZU COLLEGE OF NURSING**  
**APPLICATION FOR HOSTEL ACCOMMODATION FORM**  
**2020/2021 ACADEMIC YEAR**

**SECTION A**

**Applicant's personal details**

Surname:.....First Name:.....Other Name:.....  
Sex:..... Date of Birth.....  
Programme:.....  
Year of study..... Cell:.....  
Date of Application:.....

**Permanent home address:**

Village.....  
TA.....  
District.....  
Current Residence.....  
Next of Kin: Surname..... Initial..... Title.....  
Relationship.....  
Phone: Ground.....Cell.....

**SECTION B**

Indicate the academic year you would like to be given College accommodation.....

**SECTION C**

Do you have any disability? Yes/No (please tick)  
If 'yes' please specify and attach evidence.....

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**Rules and Regulations**

All students are expected to abide by the University of Malawi Rules and Regulations if their application is successful.

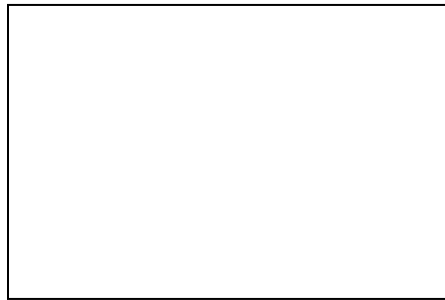
Student's signature:.....

Date:.....

**For official use**

Approved/Not approved.....

Signature:.....Stamp.....



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