

All communications should be addressed to:
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REPUBLIC OF ZAMBIA
MINISTRY OF EDUCATION

In reply please quote:

No:.....

CHIPATA COLLEGE OF EDUCATION BOARD
P. O. BOX 510189
CHIPATA
ZAMBIA

APPLICATION FORM FOR THE ADMISSION TO THREE YEAR TEACHERS’ DIPLOMA

PROGRAMME: ECE PTD JSTD

1. Surname:..... Middle Name:.....
2. First Name:.....
3. Date of Birth:..... Age:.....
4. Sex:.....NRC No:.....
5. Nationality:.....
6. Tribe:.....
7. Religious Denomination:.....
8. Address – Postal or Residential:.....
.....
9. Mobile Phone No:.....
10. Marital Status:.....
11. Sponsor’s Name/Contact Address and Phone No:.....
.....
12. Any physical disability:.....
13. Grade 12 (Twelve) results. The best five including English Language, Mathematics and any Science subject. (Please attach photo copies of results – five credits or better).

S/NO	SUBJECT	GRADE
1.		
2.		
3.		
4.		
5.		

DECLARATION:

I,.....(Name in full) declare that the information given above is correct to the best of my knowledge and also do undertake to pay all fees due to the College. Also declare that once I am accepted, I will abide by the rules and regulations of the College.

NOTE: Fees once paid cannot be refunded. Each applicant is required to pay a non-refundable fee of K150.00 (One Hundred Fifty Kwacha only).

Applicant’s Signature:.....

Date:.....