



MALAWI COLLEGE OF ACCOUNTANCY

Blantyre Campus

P.O Box 30644

Chichiri

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Tel.: +265 111 871 411

Fax.: +265 111 871 853

Email: mcabt@mca.ac.mw

Lilongwe Campus

P.O Box 30363

Capital City

Lilongwe 3

Tel.: +265 111 788 314

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mcabt@mca.ac.mw

Mzuzu Campus

Zindawa Building

P.O Box 1331

Mzuzu

Tel: +265 111 310 101

mcabt@mca.ac.mw

APPLICATION FORM FOR MASTERS IN BUSINESS ADMINISTRATION (MBA)

Application requirements

- Bachelor's degree or its equivalent qualification from an accredited institution of higher learning
- A minimum of two years of work experience
- Certified copies of academic and/or professional certificates.
- Original academic/professional transcripts obtained within two years
- Current curriculum vitae.
- Personal statement in support of your application.
- Letters of recommendation from one academic and one professional referee.
- A research Concept

A. PERSONAL DETAILS

i.Surname _____ First Name _____ Initials _____

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

Contact Address: _____

Tel: _____ Mobile: _____ Email: _____

v. Name & Address of Next of Kin: _____

Tel: _____ Mobile: _____ Email: _____

B. CAMPUS OF CHOICE: Blantyre Lilongwe Mzuzu

C. QUALIFICATIONS RECORD

i. Degree _____

Institution: _____ Year: _____

ii. Other Qualifications (only those relevant to your EMBA application):

Institution: _____ Qualification: _____ Year: _____

Institution: _____ Qualification: _____ Year: _____

D. COMMITMENT FROM SPONSOR – LETTER TO BE ATTACHED (If you will not be sponsoring yourself)

NAME: _____ RELATIONSHIP: _____

E. HOW DID YOU LEARN ABOUT THIS PROGRAMME? (Tick all that apply)

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

F. EMPLOYMENT RECORD (To cover the previous 5 years only)

Name of Employer	Position Held	Period	
		From	To
<i>(Start with the recent employer)</i>			

C. ANY SPECIAL NEEDS: (Please state any disabilities you may have or any health-related issues that you may wish the College to be aware of in advance)

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

Signature: _____ Date: _____

Application Procedures

After completing the application form, applicants must deposit a non-refundable application fee of K30,000.00 into the following bank account details:

- National Bank of Malawi - Chichiri Service Centre
- Account Name: Malawi College of Accountancy
- Current Account No. 1001697915

Then the application form, copy of the deposit slip, and all the documents mentioned above (Application requirements) should be emailed to: **admissionsmba@mca.ac.mw**.

All applications will be acknowledged via email. In the event that you do not receive an email acknowledgment 14 days after submitting your application, please contact the Course Administrator through the following email: **mcabt@mca.ac.mw**, with the subject matter: MBA Application Follow

Up.