



## APPLICATION FORM FOR RE-ADMISSION

- ❖ Applicant should attach a copy of the O' Level General Certificate of Education (GCE) or General Certificate of Secondary Education (GCSE)

### SECTION A *(shall be completed by the applicant)*

#### 1. Applicant's Personal Details

Surname: ..... Forename: .....

Other name *(where applicable)*: ..... NRC/Passport No.: .....

Email address: ..... Mobile No: .....

Physical Address: .....

Postal Address: .....

.....

#### 2. Details of Next of kin

Surname: ..... Forename: .....

Other name *(where applicable)*: ..... NRC/Passport No.: .....

Email address: ..... Mobile No: .....

Postal Address: .....

.....

#### 3. Details of Sponsor

Self-sponsored       Government of Zambia *(specify)*: .....

Other *(specify name of sponsor & relationship)*: .....

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Email address of sponsor: ..... Contact No of sponsor: .....

Postal Address of Sponsor: .....

.....

**SECTION B (shall be completed by the applicant)**

**4. LAMU Academic Details**

Programme of study (e.g. *Diploma in Nursing*): .....

Student Identity/ Computer No.: .....

Date when you started the programme (specify month and year): .....

What is your previous year of study (e.g. *3<sup>rd</sup> Year 1<sup>st</sup> Semester*): .....

When were you last registered at LAMU: .....

What year of study are you supposed to be registered in for the current semester:

.....

Signature of applicant: ..... Date: .....

**SECTION C (shall be completed by the Bursar)**

**5. Account's Details**

Balance on fees for the previous semester: .....

Name of officer: ..... Signature: .....

Date: .....

**SECTION D (shall be completed by Dean of Faculty after verification of examination results)**

**6. Recommendation by the faculty**

I recommend/ do not recommend that the applicant be re-admitted in to the university.

Justification: .....

.....

Indicate recommended year of study (e.g. *3<sup>rd</sup> Year 1<sup>st</sup> Semester*): .....

Name of officer: ..... Signature: .....

Date: .....

**SECTION E (a duly completed application form shall be submitted to the Vice Chancellor's Office)**

**7. Received by:** Name of officer: ..... Signature: .....

Date: .....