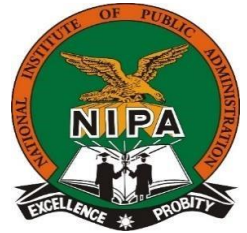


OFFICE OF THE PRESIDENT



National
Institute of Public
Administration



P.O BOX 31990, LUSAKA

TEL: +260 211-228802-4

FAX: +260 211-227212

APPLICATION FORM FOR ADMISSION TO POST-GRADUATE PROGRAMMES CENTRE FOR GRADUATE STUDIES (CGS) 2023/4 intake

Please complete all parts in block letters

Tick the appropriate box:

January intake

July intake

PART A

Tick the appropriate box:

Block-release

Distance

Degree Programme Applied for:

PGDip

MA

PhD

Date of Commencement of Programme: ()

For Details; Plot No. 4810, Dushanbe Road, P.O Box 31990, Lusaka, Zambia, Tel: +260 211 228802-4, Fax:211 227213, Cell: +260 967 611 098/

1. Study programme

2. Sponsor

3. Surname

Date of birth

(DD/MM/YYYY)

4. Other names

Place of birth

5. NRC number

Gender

(M-Male F-Female)

6. Nationality

Marital Status

(M-Married S-Single)

7. Postal address

8. Residential address

9. Telephone

10. Fax

11. E-mail

12. Name, address and contact details of next of kin:

13. Do you have any injury, illness, disability or special needs which may affect your ability to study;

Yes

No

(tick the appropriate box)

If yes, please specify your condition

14. Name, address and phone number of Next of Kin;

.....
.....
.....

PART B **PART B**

15. A) Have you ever been enrolled at this institution? YES NO

B) If your answer to 15 A is yes, please provide your Student Number

16. A) LAST SECONDARY SCHOOLS ATTENDED:

SCHOOL	PERIOD
1.	
2.	
3.	

17. Please provide the following information in the spaces provided;

Grade 12/Form 5 Examination Number

Examination Body

Year

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Indicate "O" Level subjects or equivalent grades scored in the spaced provided:

Subjects

English
Mathematics
Accounts
Geography
Biology
Physics
History
Commerce
.....
.....
.....

Grades

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

18. TERTIARY QUALIFICATIONS OBTAINED:

Please attach copies of certificate(s)/Transcript(s) of results

QUALIFICATION(S)	PERIOD	INSTITUTE
1.		
2.		
3.		

Applicants with foreign results should have their results equated to the Zambian Standard by the Examination Council of Zambia.

PART C

(TO BE COMPLETED BY THOSE IN EMPLOYMENT)

19. PRESENT

EMPLOYER Address

Job title

Appointment date

(DD/MM/YYYY)

20. PREVIOUS EMPLOYMENT

Date	Employer	Position Held
.....
.....
.....

I declare that the information provided by me in this application is accurate, correct and complete. I authorize the National Institute of public Administration to reserve the right to vary or reverse any offer of Admission made on the basis of incorrect and incomplete information.

Signature of applicant: _____ Date: _____

21. CLOSING DATE FOR SUBMISSION OF APPLICATIONS

Completed application forms must be submitted to the office of the Deputy Registrar (Academic Affairs) on or before 31st January 2023 for January intake and on or before 30th June 2023 for July intake

PART D

23. REFEREES IN SUPPORT OF YOUR APPLICATION;

There should be at least Three (3) references, Two (2) professional and One (1) academic.

Academic Referee;

Name:

Postal Address:

.....

Institution:

Position:

Professional Referee;

Name:

Postal Address:

.....

Company:

Position:

Professional Referee;

Name:

Postal Address:.....

.....

Institution:

Position:

Professional Referee;

Name:

Postal Address:

.....

Company:

Position:

23. RECOMMENDATION FROM EMPLOYER/SPONSOR/HEAD OF THE LAST EDUCATION INSTITUTION ATTENDED.

Name of recommender:

Designator:

Signature:

PART E

24. OFFICIAL USE ONLY

Admissions committee's decision:

Accepted

Rejected

Name of Chairperson: _____

Signature: _____

Date: _____

Data entry by: _____

Date: _____

Verified by: _____

Date: _____

ADMISSION REQUIREMENTS

✓ Direct Entry

Degree Programme: Grade 12 Certificate with 5 'O' level credits (1-6) English and Mathematics Inclusive

Diploma Programme: Grade 12 Certificate with 4 'O' level credits (1-6) English and Mathematics Inclusive

All Health Sciences Programmes: Grade 12 Certificate with 5 'O' level credits (1-6) English, Mathematics and Sciences Inclusive

Diploma in Accountancy (ZICA): Grade 12 Certificate with 5 'O' level credits (1-6) English and Mathematics Inclusive

Diploma in Purchasing and Supply (ZIPS/CIPS): Grade 12 Certificate with 5 'O' level credits (1-6) English and Mathematics Inclusive

- ✓ Second Year Entry into a Diploma Programme: A ZAQA approved certificate in the same field
- ✓ Second Year Entry into a Degree Programme: A Diploma in a relevant field from a reputable and recognised institution with minimum 5 'O' level credits
- ✓ Post Graduate Entry: Bachelor's Degree in a relevant field from a reputable and recognised institution accredited by the Higher Education Authority (HEA)

WHEN COMPLETED PLEASE RETURN THE FORM (Pages 1, 2 & 3) TO:

The Registrar
National Institute of Public Administration
PO Box 31990
Lusaka.

Email: executivedirector@nipa.ac.zm
WhatsApp: 0767670985

PAYMENT TERMS

1. The application fee is K182.00 and is non-refundable.
2. Applicants returning their forms by post should enclose a photocopy of their deposit receipt slips or telegraphic money orders, with full names, identification and contact number written on the deposit slip copy as proof of payment for the application to be processed.
3. Applicants can also deposit the application fee at either of the following:

ZANACO Bank
NIPA A/C No.: 0020548300144
Civic Center Branch
Lusaka.

4. Cheque payments are not accepted.