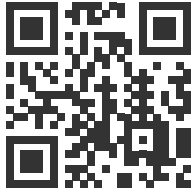




Attach a passport size photo if printing, or send as an attachment photo if filling out this form electronically.

## APPLICANT APPLICATION FOR ADMISSION - 2026-2027



<https://www.kuwala.org>

Kuwala is an equal opportunity, all-girls school in rural Malawi. Please note that space is limited. Completing this form does not guarantee your child a place at the school. The applicant/parent/guardian acknowledges there will be school fees upon acceptance of enrollment at Kuwala. Parent or guardian is responsible for providing transportation to and from campus during holidays and at the beginning and end of the school year. The school provides boarding accommodations and three meals per day.

### Instructions

Please complete this application form in full using BLOCK LETTERS if you are handwriting your responses and ensure that all information is clear and legible. Applications will only be considered for admission upon submission of a fully completed application form, proof of payment of the non-refundable application (entrance) fee, and a recent passport-sized photo of the applicant. Incomplete applications or applications submitted without the required supporting documents will not be processed.

## GENERAL APPLICANT INFORMATION

All fields are mandatory.

Applicant first name

Applicant last name

Date of birth (day / month / year)

Place of birth

Home address of Applicant

Date of birth (day / month / year)

Best phone/cel number to get a hold of Applicant

Current form

Applying for form

Academic year

### Instructions

#### Option 1:

- Fill out the form on a computer
- Download the PDF to your computer.
- Open the PDF.
- Fill in all required fields.
- Save the completed PDF form.
- Print the completed form.
- Sign and date the form.
- Attach a photo of the applicant.

Bring the completed form and photo to the next advertised Exam Day.

#### Option 2:

- Fill out the form by hand.
- Print the form.
  - Write clearly in all required fields. Use block letters.

If we cannot read or understand your answers, your application may be denied. This means the applicant may not be allowed to write the entrance exam or attend the interview.

# PARENTS/GUARDIANS INFORMATION

## Father or guardian of the Applicant

Hon/Prof/Dr/Mr First name

Last name

Relationship to Applicant

Occupation (Firm & Position):

Current home address of father or guardian

Phone/cel number

WhatsApp Number

Email address

## Mother or guardian of the Applicant

Hon/Prof/Dr/  
Mrs./Miss. First name

Last name

Relationship to Applicant

Occupation (Firm & Position):

Current home address of father or guardian

Phone/cel number

WhatsApp Number

Email address

## PERSON TO CONTACT IF PARENTS/GUARDIANS ARE UNREACHABLE

Hon/Prof/Dr/  
Mr./Mrs./Miss.

First name

Last name

Relationship to Applicant

Phone/cel number

WhatsApp Number

Email address

## SCHOOL FEES PAYMENTS

Hon/Prof/Dr/  
Mr./Mrs./Miss.

First name

Last name

Relationship to Applicant

Phone/cel number

WhatsApp Number

Email address

## APPLICANT'S ACADEMIC HISTORY

List other schools the applicant has attended before, beginning with the most recent.

School name (current)

Classes

Years

School name (past)

Classes

Years

## APPLICANT'S ACADEMIC HISTORY QUESTIONS

Has the Applicant ever had to repeat a class(es)? If answer yes. Which classes(es) and why?

Has the applicant ever skipped a class? If the answer is yes. Which classes(es) and the reason(s).

Has the applicant ever been suspended or expelled from school for any reason? If the answer is yes, please explain.

## APPLICANT'S INTERESTS / ACHIEVEMENTS

Extracurricular interest, abilities

Achievements

## APPLICANTS GENERAL MEDICAL INFORMATION

Please indicate any medical conditions of which the school and staff should be aware (e.g., asthma, epileptic etc.).

What first aid treatment do you usually give her when the applicant is under the above conditions?

Please list any allergies of which the school and staff should be aware.

Does the applicant have any handicaps that would limit her participation? If yes please explain if full below.

## OTHER SIBLINGS PRESENTLY AT KUWALA

Has the applicant's siblings presently at Kuwala as either a Applicant, teacher, or staff member? If you answer yes, please state the name in full and the dates.

First and last name

Date(s)

First and last name

Date(s)

State your reason(s) for wanting your ward (the applicant) to attend classes at this school.

# KUWALA'S MISSION AND VISION

## Vision

We are educating a generation of faith-based, truth-seeking, and innovative young women who rise with wisdom, integrity, and purpose to transform Malawi and the world through servant leadership and lifelong learning.

## Mission

To nurture and empower girls through Christ-centered education that develops the whole child spiritually, intellectually, emotionally, and socially, equipping them to become courageous leaders in their families, communities, and the nation of Malawi.



# DECLARATION BY PARENTS/GUARDIANS

I/We declare that I/we have carefully read and understood this application form. I/We confirm that the information provided in this application is true, complete, and accurate to the best of my/our knowledge. I/We understand that this information will

be used by Kuwala Christian Girls Secondary School as part of the student selection and admission process, and that any false or misleading information may result in the application being rejected or admission being withdrawn.

## Father's/Guardian Signature

Type print or type your first and last name in the input field. Then print out the form and sign your name in the box provided.

First and last name

Date (day / month / year)

## Mother's/Guardian Signature

Type print or type your first and last name in the input field. Then print out the form and sign your name in the box provided.

First and last name

Date (day / month / year)