

NATIONAL UNIVERSITY OF LESOTHO



Attach
Passport Size
Photograph

Undergraduate Application Form

The Application Form consists of five sections (A, B, C, D and E)

Applicants are strongly advised to read the Prospectus before completing the Application Form.

Completed forms must be submitted to the Admissions Office on or before 30th September, 2022

Completed forms must be accompanied by:

- An application fee of **M350.00 (Local Students), M450-00 (International Students)** paid into **Standard Lesotho Bank 9080001407356** and attach a copy of the confirmation slip.
- 2 Academic Reference forms bearing stamp of previous school.
- Certified copy of passport or ID or any form of identification showing biographical data & expiry date.
- Verified and certified copies of Educational Certificates/Transcripts excluding PSLE and JC Certificates.
- Evaluation or Conversion Certificate from Examinations Council of Lesotho (ECOL) for Matriculates. Any other foreign internationals who sat for GCSE e.g. LGCSE, IGCSE or equivalent do not need to evaluate.

For Office use only:

Surname: _____

Student Name: _____

Student Number: _____ Receipt Number: _____

(A) Personal Information

Names:		First Name:	Middle Name:	Surname:
Maiden			Date of Birth:	D/ M/ Y/
Sex:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Marital Status: Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/>	
Citizenship:	Country of Origin:		ID/Passport No:	
Home Address/Physical Address			Correspondence Address/Postal Address	
Tel Number:			Tel Number:	
Mobile:			Work:	
Email :			Email :	
Next of Kin:	Names:			Relationship:
Next of Kin Address:				
Tel:	Fax:	Mobile:	Email Address:	

Do you have any physical disabilities? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, state precisely the nature of the disability and needs.		
(1) Disability	Visual, Hearing, Physical impairment.	
(2) Needs	Other, specify	
		Describe Needs
(B) Academic Information		
Give a name of your qualifying Examination (COSC, LGCSE, National Senior Certificate, Matriculation, or Other) If qualification is COSC, please provide:		
Division & Class obtained:		
Aggregate :		
If qualification is LGCSE, please provide:		
Admission Point Score		
Attach verified copies (e.g. by Examinations Council of Lesotho – ECOL) of the results or Transcript of Academic record, Certificate of Good Conduct from the Registrar of the University/College last attended. Students who graduated from the Institute of Extra – Mural Studies (IEMS) are exempted to provide Certificate of Good Conduct.		
I am applying for: (Tick the appropriate box)		
Certificate <input type="checkbox"/>	Diploma <input type="checkbox"/>	Degree <input type="checkbox"/>
LLB (2yrs) <input type="checkbox"/>	LLB (3yrs) <input type="checkbox"/>	LLB (5yrs) <input type="checkbox"/>
Program applied for:		
1 st Choice:		
2 nd Choice:		
Have you attended this University before? (PIUS XII, UBBS, UBLS or NUL) Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, give Student Number & year of study	Student No:	Year of study:
Year from : _____ (Year) to _____ (Year of graduation)		
(C) To be completed by Applicants with Additional Post-Secondary Qualifications:		
Name of College/University/Institute:		
Address:		
Program of study :		
Date: From _____ (Year) To _____ (Year/Date of graduation)		
Class/Division or result if applicable:		

N.B: Certified copies of transcripts of academic record must be attached. Applications without certified copies of academic record will not be considered.

(D) Names, Occupations and Addresses of two Referees

Name:		Name:	
Occupation:		Occupation:	
Address:		Address:	
Tel (H):	Tel (W):	Tel (H):	Tel (W):
Fax (H):	Fax(W):	Fax (H):	Fax(W):

(E) SPONSORSHIP

Please note that your admission is not tied to your scholarship and that the University does not run Bursary Scheme for Students. Scholarships and Bursaries are awarded by the Government of Lesotho through the NMDS Scheme and other sponsors.

If you are under 21, your parent or guardian must declare as follows:

" I hold myself responsible for the payment of the full amount of fees and disbursements to be charged by the University in respect of each year for which my Son/Daughter/Ward/Myself will be registered as a student of the University"

Name

Signature

Date

Declaration by Applicant

"I declare that all the above information is correct and true to the best of my knowledge. If admitted at the University, I undertake to conform to the rules and regulations of the University"

Signature

Date

Completed Application Forms should be addressed to:

The Admissions Secretary

National University of Lesotho

P O Roma, 180

Lesotho.

Southern Africa

Tel: (+266) 22340601/52213808/52213809/52213846/52213847