



FOUNTAIN OF PEACE COLLEGE OF HEALTH SCIENCES LIMITED

PLOT No. 718-719 Fairview, Along Fairview road near the Prison, P.O BOX 560277, Petauke, Zambia.

TEL: 0216371632

Cell Phones: 0977 793 464,

NOTE

1. There is a non-refundable fee of K100
2. The application will not be considered if not completed.
3. Attach photocopies of the following
 - a) School certificate
 - b) Letter of recommendation from the employer or sponsor (specify the particulars of the sponsor)
 - c) Photo copy of the National registration card
 - d) Filled in application to be sent to:
The Director of Programmes
Fountain of Peace College of Health Sciences
Plot no. 718-719, Fairview,
Petauke.

PERSONAL APPLICANTS DETAILS

Surname:

First Name:Other Names:

Gender:

Marital Status:

Number of Children:

National registration card No./ Passport No.:

Nationality:

Postal address:

Tel:Mobile:Fax:

Email Address:

Permanent residential Address:

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Email Address:

EMPLOYER IF ANY

Name of the employer/ sponsor:

Name of institution:

Postal Address:

Tel: Mobile: Fax:

Email Address:

B. HIGH SCHOOL/ COLLEGE ATTENDED

NAME OF THE SCHOOL	PERIOD	COURSE	QUALIFICATION

C. HIGH SCHOOL CERTIFICATE RESULTS

SUBJECT	GRADE	SUBJECT	GRADE
ENGLISH		NUTRITION	
MATHEMATICS		HUMAN AND SOCIAL BIOLOGY	
BIOLOGY		ATRS	
PHYSICS		COMMERCE	
CHEMISTRY		PRINCIPALS OF ACCOUNTS	
SCIENCE		RELIGIOUS EDUCATION	
AGRIC SCIENCE		ADDITIONAL MATHEMATICS	
HISTORY		BEMBA	
WOODWORK		NYANJA	
GEOGRAPHY		TONGA	
ENGLISH LITERATURE		LOZI	
TECHNICAL DRAWING		OTHERS	

D. Your Hobbies:
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DECLARATION:

IHereby declare that the information provided in this form and all supporting documentation is accurate and complete and acknowledge that, if proved to have provided false information may result in criminal proceedings being taken against me.

Applicants sign:Date:

Guardian / Sponsor Sign:

Postal Address:

District:Town:

Contact Mobile/ Tel:Fax:

Email Address:

FOR OFFICIAL USE ONLY

Applicant fee paid:

Accepted to attend interviews:

Or Not accepted to attend interviews:

Comments:

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