



CIU, A Member of CDT Group Germany Composed of Central International University-CIU, Diversity Learning Institute-DLI & Twikatane e.V Chariry Germany All Registered According to the German-EU and Zambian Laws

ZAMBIA APPLICANTS

MASTER DEGREE APPLICATION FORM

NOTE: After submitting this Application Form, Pay the Application Fee of K250.00 to the bank account stated below. If not paid, your application will NOT be processed!

Account Name: Twikatane e.V Account Number: 0321030001158 Branch: Mungwi *Give this form to our physical office or send it to us by Email: mail.central-international-university.org

SECTION A: PERSONAL INFORMATION

- 1. Full Name:
- _____ 2. Date of Birth (*DD/MM/YYYY*):
- 3. Gender: [] Male [] Female
- 4. Nationality: ____
- 5. Identification Number (Passport/National ID): _____
- 6. Contact Information:
 - WhatsApp/Phone: _____
 - Email: _____
 - Postal or Home Address:

SECTION B: ACADEMIC BACKGROUND

- 1. Undergraduate or Diploma Institution:
- 2. Degree /Diploma Awarded: _____
- 3. Major/Field of Study: _____
- 4. Year of Graduation:
- 5. Academic Honors (if any):
- 6. Additional Certifications:

SECTION C: PROFESSIONAL EXPERIENCE (*if applicable*)

- 1. Current Employer: ______
- 2. Job Title:
- 3. Duration of Employment:
- 4. Key Responsibilities:

SECTION D: PROGRAM CHOICE

Look at our courses on website <u>www.central-international-university.org</u>

- 1. Preferred Master's Program: _____
- 2. Area of Specialization (if any):
- 3. Mode of Study: Contact Distance Learning (CDL)

SECTION E: STATEMENT OF PURPOSE

(Please attach a one-page statement outlining your academic interests, professional goals, and reasons for pursuing this Master's degree.)

SECTION F: SUPPORTING DOCUMENTS (*Please attach copies of the following*)

- 1. Certified Copies of Academic Certificates and Transcripts
- 2. Copy of National ID/Passport
- 3. Updated Curriculum Vitae (CV)
- 4. Two (2) Letters of Recommendation
- 5. Proof of Payment of Application Fee (if applicable)
- 6. Passport-Sized Photograph

SECTION G: DECLARATION

I, _____, declare that the information provided in this application form is true and complete to the best of my knowledge. I understand that providing false information may result in disqualification or dismissal from the institution.

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

- Application Received By: _____ Date: _____
 Application Reference Number: ______
- Status:

General Remarks: _____