REPUBLIC OF ZAMBIA

MINISTRY OF COMMUNITY DEVELOPMENT AND SOCIAL SERVICES

STUDENT APPLICATION FORM 2026 INTAKE

DEPARTMENT OF COMMUNITY DEVELOPMENT
MONZE COMMUNITY DEVELOPMENT STAFF TRAINING COLLEGE
P.O. BOX 660078
MONZE

SERIAL NO. CDC/2026/24

1.	***ACCEPTED***
2.	*NOT ACCEPTED*

REASON(S)

Application fee – K150.00 (non-refundable)

APPLICATION FORM 2026 INTAKE

1. **PERSONAL DETAILS [USE BLOCK LETTERS]**

SURNAME	
FORENAME (S)	
NRC	
PASSPORT NO. **(for non-Zambians)**	
DATE OF BIRTH	D D M M Y Y Y Y
NATIONALITY	SEX
MARITAL STATUS	**MARRIED** ☐ **SINGLE** ☐ **DIVORCED** ☐ **WIDOW** ☐ **WIDOWER** ☐
MOBILE NO.	
E. MAIL	
DISABILITY STATUS	Kindly check 'yes' if you are a person living with a disability. Indicate the nature of the disability **YES** ☐ **NATURE** **IF YES, please indicate the nature of your disability (e.g., visual impairment, physical/mobility impairment, hearing impairment, mental health condition, chronic illness, learning disability, etc.).** _____

2. **ADDRESSS DETAILS**

RESIDENTIAL ADRESS		
POSTAL ADRESS		
NEXT OF KIN **(NAME AND PHONE NUMBER)**	NAME	PHONE NUMBER
	ADDRESS	EMAIL

3. ACADEMIC BACK-GROUND

SCHOOL	YEAR		QUALIFICATIONS OBTAINED
	FROM	TO	

4. SCHOOL CERTIFICATE EXAMINATION RESULTS [BEST FIVE INCLUDING ENGLISH AND MATHEMATICS] AND ANY OTHER THREE SUBJECTS

SUBJECT	GRADE
ENGLISH	

5. PROFESSIONAL QUALIFICATIONS

INSTITUTION	YEAR		QUALIFICATIONS OBTAINED
	FROM	TO	

6. PROGRAM CHOICE Choose only one programme)

PROGRAM	DURATION	TICK PROGRAM OF CHOICE
CERTIFICATE IN COMMUNITY DEVELOPMENT *(TEVETA)*	**1 YEAR 6 MONTHS**	
DIPLOMA IN COMMUNITY DEVELOPMENT *(TEVETA)*	**3 YEARS**	
DIPLOMA IN SOCIAL WORK *(MULUNGUSHI UNIVERSITY)*	**2 YEARS**	
DIPLOMA IN DISABILITY AND INCLUSIVE DEVELOPMENT *(UNZA)*	**3 YEARS**	
DIPLOMA IN GENDER, ENTREPRENEURSHIP AND DEVELOPMENT *(UNZA)*	**3 YEARS**	

(***Qualifications***: *For Certificate programme minimum qualification is 5 passes including English, While for Diploma programme the minimum qualification is 5 credits including English*)

7. MODE OF STUDY

	FULL TIME		**DISTANCE**	

8. INTAKE

JANUARY		**APRIL/ MAY**	

I understand that Monze Community Development Staff Training College reserves the right to withdraw admission if is found out that any of the documents used to again admission are not genuine.

_____ _____

SIGNATURE OF APPLICANT **DATE**

Attach the following documents

- Certified copy of grade 12 Results
- Certified copy of NRC or passport for non-Zambians.
- Disability certificate (applicable to applicants with disabilities)
- Please note that all qualifications obtained outside Zambia must be verified and authenticated by the Examinations Council of Zambia (ECZ).
- Non-Zambian must obtain a study permit and clearance from the immigration department.

BANK DETAILS FOR DEPOSITING THE FEES

ACCOUNT NAME	**MONZE COMMUNITY DEVELOPMENT COLLEGE**
BRANCH	**MONZE**
ACCOUNT NMBER	**0163064300258**
BANK NAME	**ZANACO**

OFFICIAL USE ONLY

PROCESSED BY	
PROCESSING DATE	
VERIFIED BY	