

National Council for Higher Education

**Application for Provisional Registration to Operate an
Institution of Higher Education**

Please fill all items on this form electronically, append attachments and submit to: registration@nche.ac.mw. Then print out ONE copy, initial every page, obtain signatures of senior officers and validation by a notary public on the last page and post to: The Chief Executive Officer, National Council for Higher Education, Private Bag B371, Lilongwe 3, Attn: Provisional Registration.

1. Proposed University/College:

(a) Name

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(b) Incorporation (Attach a copy of the Constitution or Articles of Association, plus a copy of registration with the Registrar of Companies or NGO Board)

Chairperson of the Council/Board (Attach copy of identity document):

Secretary of the Council/Board (Attach copy of identity document):

Members of the Council/Board and their Designations (Attach copy of identity document for each person):

Date of Incorporation/Registration:

Owners/Shareholders of the Institution (Attach copy of identity document for each person):

Affiliation (specify whether religious, not-for-profit, or for-profit):

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2. Contact Information

(a) Postal Address:

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(b) Physical Address:

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(c) Fax Number:

.....

(d) E-Mail Address: _____

(e) Website: _____

(f) Telephone Lines: _____

Fixed: _____

Mobile: _____

3. Proposed Programmes Information

(a) Area(s) of focus for the proposed institution _____

(b) Proposed programme(s), mode(s) of delivery and enrolment

Programme	Mode of delivery	Enrolment

(c) Briefly describe the generic criteria for student admission into each programme _____

4. Infrastructure to Support the Delivery of Higher Education

(a) Facilities available

Facility	Number of Units	Seating capacity
Classroom/ lecture theatres		
Laboratories		
Computer laboratories		
Specialized studios (specify)		
Auditorium/ Hall		

Library		
Cafeteria		
Accommodation (bed space, by sex)		
Internet connectivity bandwidth (Mbps)		
Sanitation facilities (toilets and bathrooms, by sex)		
Sports and recreation facilities		
Health facilities		
Other (please specify)		

(b) Facilities in support of people with disabilities.

5. Human resources for the delivery of higher education

(a) Full time academic staff members (for each programme, attach list of names with details of sex and qualifications, including where obtained and year)

Programme	Doctorate	Masters	Bachelors	Diplomas	Total

(b) Part-time academic staff members (for each programme, attach list of names with details of sex and qualifications, including where obtained and year)

Programme	Doctorate	Masters	Bachelors	Diplomas	Total

(c) Technical and support staff (for each programme, attach list of names with details of sex and qualifications, including where obtained and year)

Programme	Doctorate	Masters	Bachelors	Diplomas/ Certificates	Total

(d) Administrative staff (for each department/section, attach list of names with details of sex and qualifications, including where obtained and year)

Department/ Section	Doctorate	Masters	Bachelors	Diplomas	Total

6. Other Administrative Details

(a) Names of Council members for the proposed institution.

Name	Highest qualification	Area of specialization

(b) Principal Officers of the proposed institution. (Attach an organogram.)

Name	Position	Highest qualification
	Chancellor or equivalent	
	Vice Chancellor or equivalent	
	Director of Academic Affairs or equivalent	
	Registrar or equivalent	
	Finance Director or equivalent	
	Legal Counsel	
	Librarian	

7. Finance Structure

Please describe briefly how the institution shall be financed, including student fee structure. (Attach a business plan that indicates that the institution shall remain a going concern.)

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8. Signatures of Senior Officers

(a) Chairperson of Governing Council

Name:

Signature:

Date:

(b) Vice-Chancellor

Name:

Signature:

Date:

(c) Registrar

Name:

Signature:

Date:

Validation by notary public:

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