



APPLICATION FORM – 2021

Give complete details-any omission will invalidate this application.

A. NON-SCHOOL LEAVERS

B.READMISSION

1. PERSONAL DETAILS

Surname:		First Name:	
Sex (M/F):		Date of Birth:	
Country of citizenship:		District:	
Home Province:			
Contact address (where the DLC can contact you)			
Postal:			
Email:			
Phone:		Fax:	

2. PROPOSED COURSES

List one or two choices in order of preference	Decision	Initials	Date
1.			
2.			
Will you study full-time or Distance?			
	Full-time	Distance	
Are you applying for re-entry to DLC?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If so, attach a copy of your last results and state your Student number.	<input type="checkbox"/>		
Have you been discontinued from this school for any reason?			
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If so, attach a letter explaining why you think that you should be Re-admitted			

3. EDUCATION

Name of Secondary School Colleges etc, attended	Date Entered	Date Left	Award
1.			
2.			
3.			
4.			
<i>*Attach certified copies of your certificates.</i>			

4. EMPLOYMENT RECORD

List all jobs you have had since leaving school.		
Employer	Period Employed	Position Held
1.		
2.		
3.		

5. REFERENCES

Attach character references by two persons from any of the following: Principal/Headmaster, Justice of Peace, Priest/Pastor, Village Councilor, Senior Public Servant, Current or last employer.

1:

2:

3:

6. DISCIPLINARY RECORD

i). Have you ever been disciplined in school, college or University	Yes	No
If so, for what reason? And MUST provide current documented evidence of: (1) Professional counselling and (2) Rehabilitation.		
ii) Have you ever been convicted of a criminal offence?	Yes	No
If so, what was the nature of the offence?		

7. OTHER APPLICATION

Have you applied for admission to any other educational institutions?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, specify institutions and courses applied for.		

8. Scholarship

Have you applied for any scholarship with Government/Province/NGO/Private org/Private	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Scholarship application details		
Applied to:		
Amount applied:		
Date:		
Ref No:		
Office address:		
Contact No:		

9. DECLARATION

Enrolment, if approved will be subject to the information on this form being correct. False information will lead to immediate cancellation of enrolment and may result in prosecution being carried out under Papua New Guinea laws.

I certify that I have read and understood all questions on this form. The answers given are true and complete in every particular. Furthermore, the services rendered by the University are privileges that I will uphold with care and responsibility.

If accepted, I undertake to abide by the University's Rules and Regulation in as far as they apply to studies.

Signature: Date:/...../.....