

	ZOMBA CATHOLIC SECONDARY SCHOOL P. O. Box 2 Zomba MALAWI. Tel: (+265) 0997 541 116/ 0883 414 442 E-mail: zombacatholic@gmail.com	Photo
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2026 ENTRANCE FORM FOR FORM 1 EXAMINATIONS

APPLICATION NUMBER EXAMINATION VENUE DATE OF ENTRANCE EXAMS: SATURDAY, 4TH JULY, 2026 TIME: 08:30 am to 10:30 am <i>NOTE: THIS FORM SHOULD BE UPLADED ON https://admissions.zombacatholic.com BEFORE THE DAY OF EXAMS</i>

PERSONAL INFORMATION

FIRST NAME

SURNAME

MIDDLE NAME

DATE OF BIRTH AGE

PLACE OF BIRTH: (DISTRICT) COUNTRY

MOTHER TONGUE (LANGUAGE)

APPLICANT ADDRESS

HOME DISTRICT

HOME COUNTRY

HOME VILLAGE T/A

PARENT/GUARDIAN DETAILS

PARENT NAME

PARENT ADDRESS

PARENT CONTACT PARENT EMAIL

PREVIOUS SCHOOL

PREVIOUS SCHOOL

REQUIRED DOCUMENTS:

The following documents **MUST** be submitted together with this form:

1. Passport Photo
2. Proof of Payment
3. Religious Testimonial Letter

VENUES FOR EXAMINATIONS:

1. Likuni Boys Secondary School (Lilongwe)
2. Mary Mount Girls Catholic Secondary School (Mzuzu)
3. St Charles Luangua Community Day Secondary School (Balaka)
4. St Maria Goretti Primary School (Blantyre)
5. Zomba Catholic Secondary School (Box 2) (ZOMBA)

NON-REFUNDABLE EXAMS FEE: MK 40,000.00

This **MUST** be deposited into: **FDH**, Account: **ZOMBA CATHOLIC SECONDARY SCHOOL**, A/C No: **1210100471009**, Type: **CURRENT**, Branch: **ZOMBA**