



# African Christian College

PO Box 331 • Manzini, M200 • Swaziland  
(+268) 2550-6080 | fax: 2550-6119  
apply@AfricanChristianCollege.org  
www.AfricanChristianCollege.org/apply

Dear Potential Student,

We appreciate your interest in studying at African Christian College. Our mission is to glorify God by equipping students for excellent service in His kingdom. Studying at ACC will prepare you as a leader and minister in your community, church, and family.

This package contains an application form and other necessary papers for applying.

Your application to study will not be complete *nor* considered until we have all your documentation. Please make sure you send in these forms promptly with your application so it can be processed.

- a) Complete application form, attached
- b) Letter of recommendation from your preacher, attached
- c) Letter of recommendation from your congregation's leadership, attached
- d) Certified copies of all educational certificates and transcripts (copy back and front)
- e) Certified copy of Marriage certificate, if married
- f) Certified copy of your identification document
- g) Certified copy of your passport (once you have one)

If you have other documents you think we ought to consider, please send those also.

All students must have a good command of English to keep up with the rigorous study at ACC. Since we have more applicants than we have room to accommodate, we cannot guarantee your acceptance. Your prompt submission of the necessary papers helps move the decision-making process along.

Married couples often choose to both earn degrees while at African Christian College. Separate applications and documentation must be submitted by each person for application (though they may be mailed together). Each student must meet admission requirements and meet expectations, including student fees.

Should you need additional information, please contact us. We look forward to hearing from you.

Yours in Christ,

Wendy Platt  
Registrar

## *African Christian College*

# **APPLICATION INFORMATION – 2013 ENROLMENT**

*The ACC Prospectus 2013 includes detailed information about our academic programmes, entrance qualifications, courses, and expectations. Please review this document to familiarize yourself with African Christian College and the quality education you can receive on our campus.*

## **Entrance Qualifications**

All applicants should be of the Christian faith and actively involved in the work of a particular congregation. A recommendation form from the preacher and church leadership is required of all prospective students.

Entering students must **have a minimum of six passes in the IGCSE** (International General Certificate of Secondary Education) and **must include passes at “C” grade or better in English** Language and at least four other relevant subjects. Equivalent credentials are required for students applying from countries outside Swaziland.

A mature entry consideration is given to students over the age of 30 years (subject to English proficiency evaluation) provided they have been out of Secondary School for a minimum of 5 years.

## **Transfer of Credit**

Potential students seeking course credit transferred from a previous institution must submit a certified copy of their transcript with their application or give an explanation as to why it is delayed.

Credit from previous course work can only be given to students transferring from accredited institutions. Granting of advanced credit is at the sole discretion of African Christian College and no guarantee is made or inferred that it will occur.

## **Financial Responsibilities & Financial Aid**

Students have the following financial responsibilities while attending:

- All students are required to pay R12000 in annual tuition and registration fees.
- All students must pay a monthly boarding and catering fee. This fee includes three daily meals, housing, electricity, and water utilities.
  - Single students pay R1000 per month
  - Students with families pay R2000 per month
- All students must acquire Swaziland Study Permits. ACC will aid in documentation, but the cost (R900 per person, per year) is the students' responsibility.
- Students with school age children are required to pay for their own children's school fees (government schools: R800-R1000/yr for primary; R4000-R6000 for secondary school) and school uniform (R300–R800).

*Cost should not deter qualified students from applying or attending.* Financial aid to assist with tuition and housing fees is awarded based on need. Students are encouraged to seek support from sponsors and home congregations. Paid on-campus employment is also available to assist. Financial aid is not available for study permits or children's school fees.



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## Student Application

Fully complete the information below and submit to African Christian College for consideration of admission.  
 Failure to provide full and true information may result in disqualification or dismissal.

### I. Personal Information

Surname \_\_\_\_\_ First Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Nationality \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_

Personal Identification number \_\_\_\_\_

Residential address \_\_\_\_\_

Postal address \_\_\_\_\_

Email address \_\_\_\_\_

Telephone numbers: Code \_\_\_\_\_ Number \_\_\_\_\_ Home  
 Code \_\_\_\_\_ Number \_\_\_\_\_ Cell  
 Code \_\_\_\_\_ Number \_\_\_\_\_ Work

Date of baptism \_\_\_\_\_ Name of person who baptized you \_\_\_\_\_

Marital Status:

- ..... Single
- ..... Married
- ..... Widowed
- ..... Divorced
- ..... Single Parent

*If married, please complete below:*

Marriage date .....

Spouse name .....

Date of baptism ..... Date of birth .....

Particulars of Children & Dependents:

*	Name	Age	Grade	Relationship to Applicant (child, adopted, previous marriage)
				M_ F_
				M_ F_
				M_ F_
				M_ F_

*\*Please tic the names of the children who will accompany you to Swaziland, if accepted.*

## II. Health Information

Please note: If needed, there is space for explanation details on page 3 of this application.

	Applicant	Spouse	Child/ren
Do you have <b>ALLERGIES</b> ?	Yes No	Yes No	Yes No
Do you have <b>DIABETES</b> ?	Yes No	Yes No	Yes No
Do you have <b>HIGH BLOOD PRESSURE</b> ?	Yes No	Yes No	Yes No
Do you have <b>ASTHMA</b> ?	Yes No	Yes No	Yes No
Do you have <b>DEPRESSION</b> ?	Yes No	Yes No	Yes No
Are you presently receiving <b>medical attention</b> ?	Yes No	Yes No	Yes No
Do you have any permanent <b>physical impairment or handicap</b> ?	Yes No	Yes No	Yes No
Are you <b>PREGNANT</b> ?	Yes No	Yes No	Yes No
Are you on any <b>medication</b> ? <i>If yes, please list medication name and reason for taking it</i>	Yes No	Yes No	Yes No
Please list other illnesses you may have.			

Do you understand that African Christian College does **not** have a medical aid plan and that you must provide your own medical aid or use the government hospitals? Yes \_\_\_\_\_ No \_\_\_\_\_

Please provide an **EMERGENCY CONTACT** name and phone number (and email, if possible):

\_\_\_\_\_

## III. Employment Record

Please complete the information on your employment for the last ten years.

Employer: _____	Job Description: _____
Address: _____	
Phone: _____	
Job title: _____	
Dates employed: _____	
Employer: _____	Job Description: _____
Address: _____	
Phone: _____	
Job title: _____	
Dates employed: _____	
Employer: _____	Job Description: _____
Address: _____	
Phone: _____	
Job title: _____	
Dates employed: _____	

### IV. Educational Qualifications

*Please note: Certified copies of all educational documents must accompany this form for your application to be processed.*

Highest level of education achieved \_\_\_\_\_

Please list your educational qualifications, other trainings, and achievements, apprenticeships, etc.:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### V. Financial Aid

Do you currently receive financial support from a congregation?	Yes _____	No _____
Have you requested financial support from your congregation?	Yes _____	No _____
Do you currently receive financial support from other sources?	Yes _____	No _____
Do you plan to apply for financial aid?	Yes _____	No _____

### VI. Affidavit

I, \_\_\_\_\_, honestly declare that the information and answers in this application are true and whole. I realize falsification of information could result in my dismissal from African Christian College or denial of admission.

Furthermore, I realize that while at African Christian College I will be expected to follow all rules and regulations and pay all debts incurred.

Date \_\_\_\_\_ Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_ Witness Signature \_\_\_\_\_

Full name, address, phone, and email of witness \_\_\_\_\_  
\_\_\_\_\_

**COMMENTS:** *If necessary, please use this space or additional sheets to give details of medical situations or other items needing further explanation. You may also use this space for comments.*

\_\_\_\_\_  
\_\_\_\_\_  
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## Preacher's Reference Form

*Applicant, please fill in your name below and give to your preacher for completion and submission.*

Dear Brother, We appreciate your frank and honest appraisal of this applicant.

\_\_\_\_\_ has applied to study at African Christian College.

Name of Preacher \_\_\_\_\_

Name of Congregation \_\_\_\_\_

Postal Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

How long have you known the applicant? \_\_\_\_\_ years

His/her desire for Christian service is: Long-standing \_\_\_\_\_ New \_\_\_\_\_ Surprising \_\_\_\_\_

He/she is: Single \_\_\_ Married \_\_\_ Divorced \_\_\_ Engaged \_\_\_ Widowed \_\_\_

(If married:), his/her spouse will be helpful as a Christian servant: Yes \_\_\_ No \_\_\_

Please list this applicant's current involvement in church activities: \_\_\_\_\_

### Your Assessment of Personal Qualities

Considering the applicant, please mark your agreement of the following statements.

	Absolutely	Yes	Not really	Not at all	Unsure
I know the applicant very well.					
The applicant is... optimistic					
... easy to get on with					
... reliable					
... of average temperament					
... congenial/nice					
... ethically Sincere					
... ethically Honest					
... financially responsible					
... a potential leader					
... intellectually brilliant					
... in good physical health					
Spouse in good physical health					
Children are... in good health					
... well behaved					
... emotionally balanced					
... obedient					

Signature \_\_\_\_\_

Date \_\_\_\_\_

*Please add comments on back of page. Please include your church stamp. Thank you for your assistance.*



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## Church Congregation Reference Form

*Applicant, please fill in your name below and give to a leader of your congregation for completion and submission.*  
Dear Church, We appreciate your frank and honest appraisal of this applicant.

\_\_\_\_\_ has applied to study at African Christian College.

Name of Congregation \_\_\_\_\_

Postal Address \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

Please list this applicant's current involvement in church activities: \_\_\_\_\_

\_\_\_\_\_

At a business meeting of this (select one: eldership \_\_\_ congregation\_\_\_) on the \_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, we discussed and agreed to respond to information regarding the above church member who has applied to African Christian College.

✓ **Please tic the correct statements below that reflect your opinion.**

- \_\_\_ I. He/she has been a faithful member of this congregation for \_\_\_\_\_ months/years.
- \_\_\_ II. He/she has NOT been a faithful member of this congregation.
- \_\_\_ III. We have no hesitation recommending this applicant for your college.
- \_\_\_ IV. We hesitate recommending this applicant for study for your college.
- \_\_\_ V. We have reservations regarding recommending this applicant for your college.

Please briefly state your hesitations or reservations of this applicant: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What ways is the congregation considering helping the applicant with his/her education and development?

\_\_\_\_\_

\_\_\_\_\_

What financial assistance has been offered by the congregation to the applicant at this point? \_\_\_\_\_

**Chairman/Elder Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Secretary/Elder Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Leader/Elder Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_