



ESSENCE HEALTH SPECILIZED COLLEGE

P.O BOX 96415, WINDHOEK, 9000

APPLICATION FORM - 2026 June Intake

PASSPORT PHOTO

PROGRAM: (1st Choice) _____

2nd Choice: _____

3rd Choice: _____

Please, type or print clearly, IN BLOCK LETTERS:

Last Name _____

First Name _____ **Middle Name** _____

Postal address: _____ **Postal code:** _____ **Country**

_____ **City** _____

Residential address: _____ **Street:** _____

Cellphone: _____ **Fax:** _____ **E-mail:** _____

Student number (if any): _____ **Academic year:** _____

SECTION 1: PERSONAL PARTICULARS

Date of Birth:	D	D	M	M	Y	Y	Y	Y	I.D. No.:											
Passport No.:									Marital Status:	Single		Married								
Gender:	M		F						Maiden Name:											
Mother Tongue:											Home Town:									
Citizenship:	Namibian			Other (specify)																
If not a Namibian citizen, please apply for a study permit from your country of origin.																				

Do you have an impairment or disability?	Yes		No		<i>(for planning purposes only)</i>
If 'yes' please specify and attach documents specifying your condition.					
Based on your disability, do you have special needs?				Yes	No
If 'yes' briefly state your additional needs arising from the above mentioned impairment or disability.					

SECTION 2: APPLICANT'S NEXT OF KIN/LEGAL GUARDIAN PARTICULARS

(To be contacted in case of emergency.)

Family relationship with the person whose particulars are supplied.											
Father			Mother			Spouse/partner			Guardian		
Title:				Mr		Ms		Other (specify)			
Surname:											
First Names in full:										Initials	
I.D. No.:											
Home Address (next of kin/guardian):											
Tel No.: Work											
Tel. No.: Home								Cell No.:			
Employer (next of kin/guardian):											
Occupation:											
Employer's Address:											

SECTION 3: EMPLOYMENT PARTICULARS (only if applicant is in full-time employment)

Name of Employer:	
Your Occupation:	
Years of Experience	
Employer's Postal Address:	
Employer's Telephone No.:	

SECTION 4: SCHOOL LEAVING PARTICULARS

Last secondary school attended:			
Address of school:			
Highest grade passed:			
Current grade (if applicable):			
Date of examination:			
Examination number:			
Examination body:			
Subject (Best 5 Subjects, including English)		Level ## <i>(See table below)</i>	Symbol

LEVEL			
ON = NSSC	IG = IGCSE	AL = A LEVEL	HG = HIGHER GRADE
NH = NSSC	HI = HIGCSE	OL = O-LEVEL	SG = STANDARD GRADE
			LG = LOWER GRADE

SECTION 5: POST-SCHOOL ACADEMIC QUALIFICATIONS

Note: A full Academic Record ISSUED by the INSTITUTION SHOULD accompany THIS application.

Student No.	From Year	To Year	Name of University/College/Academy			
Name of Programme:			Awarded:	Y	N	
Have you ever been refused admission to any Tertiary Institution?				Y	N	
Are you currently enrolled at another institution of high learning?				Y	N	
If 'yes' please indicate where.						

BANKING DETAILS:

ESSENCE HEALTH SPECIALIZED COLLEGE
FIRST NATIONAL BANK - WINDHOEK
 Account number: 62271029342
 Branch code: 280172



DECLARATION

I hereby declare that all the particulars given in this application form are true and correct. I further declare that my enrolment as a student at Essence Health Specialized College shall be subject to the terms and conditions contained in the agreement, which I shall complete, sign and submit at registration.

SIGNATURE OF APPLICANT

Date

SIGNATURE OF GUARDIAN

(If applicant is under 21 years of age)

Date

FOR OFFICIAL USE ONLY:

APPLICATION FEE RECEIVED: _____ RECEIPT NUMBER: _____

LATEFEE RECEIVED: _____ RECEIPT NUMBER _____

Please circle which is applicable: Accepted / Rejected

IMPORTANT INFORMATION:

Documents to be submitted with Application Form (Tick✓):

- ID Document - certified copy or
- Passport - certified copy or
- Birth Certificate - certified copy
- Passport photo
- School Leaving Certificate - certified copy
- Application Fee proof of payment
- Official Translation (Non-English Documents)
- NQA Evaluation Report (International Qualifications)
- School Results/ Rapport (Namibian Schools – Current Grade 12)

Application Dates and Fees (Non-refundable):

The following must be paid into EHSC Bank Account. **(Please attach proof of payment to the application form):**

- Namibian Applicants (until 31 July 2026) **(N\$ 200.00)**
- International Applicants (until 31 July 2026) **(N\$ 300.00)**
- Late Namibian Applicants (until 14 August 2026) **(N\$ 250.00)**
- Late International Applicants (until 14 August 2026) **(N\$ 400.00)**