

This Loan Application Form attracts a non-refundable Processing fee of K5,000.00



Attach 2 passport Photographs (Write name and college/university behind the photos)

Supporting Needy and Deserving students To Access Higher Education in Malawi

**HIGHER EDUCATION STUDENTS' LOANS AND GRANTS BOARD**

**ODEL STUDENTS' LOAN APPLICATION FORM  
2023/2024**

**TO BE COMPLETED BY A STUDENT WHO HAS NEVER BENEFITED FROM THE STUDENTS LOANS**

**(Complete all sections in Capital /Block Letters)**

**STUDENT NAME.....**

**CAUTION:**  
1. Any applicant who knowingly makes a false statement in writing or orally relating to any matter affecting the request for a Loan shall be guilty of an offence punishable by law.  
2. Any application that does not have all the required information and attachments as listed in section K on page 8 shall not be processed.

**A. TERMS AND CONDITIONS**

1. A loan beneficiary shall, within two (2) years upon successful or unsuccessful completion of the course for which the loan was granted, or upon earlier termination of such course for any reason or cause whatsoever, start the repayment of his/her student loan to the Board.
2. The loan shall be repaid over a maximum period of five (5) years commencing two (2) years after completion of studies, beyond which the Board will have the right to take legal action.
3. The loans shall be applied for each and every year.
4. The loan shall be repaid with a value maintaining fee of 15 % compound interest at maturity which is two (2) years after successful/ unsuccessful completion for a maximum period of five (5) years.
5. The Board shall have the sole discretion of changing and varying the interest rate as circumstances shall demand.
6. The Board retains the right to evaluate all loan applications and determine the number of beneficiaries. (This application is not a guarantee that the loan shall be approved)
7. In the event that the Loan Applicant discontinues studies for whatever reason before full disbursement is made, the Board shall not disburse the remaining allocation and shall recall the loan so far advanced in full together with the interest thereon.

8. At a minimum, the loan shall be repayable in equal monthly instalments as determined by the Board. Once off payments are also accepted.
9. If a Loan Applicant defaults in repayment when the loan is due, the whole amount shall become due and payable and the Loan Applicant shall be bound to pay all other charges that may arise as a result of the default including but not limited to legal fees and penalties.
10. The signature of the applicant shall certify the reading, understanding and being in agreement with the terms and conditions herein.
11. No loan shall be disbursed unless the loan application form is approved and upon the Loan Applicant completing the bonding form and the letter of undertaking which shall be required to be submitted to the Secretariat.

<b>B. PERSONAL DETAILS OF THE APPLICANT</b>					
Surname:	First Name:	Other Names:	SEX:	F	M
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Date of Birth: DD ____ MM ____ YY ____ (attach birth certificate where possible)					
National ID Number (Please attach copy, this is a <b>MUST</b> ):					
<b>Permanent Address:</b>					
Postal Address:			Telephone(s):		
Email Address:			District of Origin:		
T/A:					
<b>Current Address:</b>					
Village/Township:			Contact Person in emergency:		
T/A:			Telephone No. of contact person:		
District:			Name of Next of Kin:		
Street:			Email for Next of Kin:		
Plot No. (Where applicable):			Telephone No. of Next of Kin:		
Occupation of Next of Kin:			Location of Next of Kin:		
Postal Address of the next of kin:					
Do you have any disability? /Special Learning Needs? Yes <input type="checkbox"/> No <input type="checkbox"/> (if yes, please specify)					
Marital Status(tick) Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/>					
Attach applicable documents					

<b>C. DETAILS OF UNIVERSITY/COLLEGE TO WHICH YOU ARE ADMITTED</b> (attach a copy of an admission letter)
Name of University/College:
Faculty:

Year of Admission:  
 Registration Number:  
 Academic Year Loan Applied for: 1<sup>st</sup> Yr  2<sup>nd</sup> Yr  3<sup>rd</sup> Yr  4<sup>th</sup> Yr  5<sup>th</sup> Yr   
 Program Admitted for:  
 Program Duration:  
 Attach a copy of your student ID

**D. (i) APPLICANT'S EDUCATION BACKGROUND INFORMATION**

Level of Education	Institution/Schools Attended	Year of Completion	Fees Paid Per Year	Fees Paid by
Universities/ College Attended				
(1)				
(2)				
(3)				
(4)				
A' Level Schools Attended				
(1)				
(2)				
Secondary Schools/"O" Levels Attended				
(1)				
(2)				
(3)				
(4)				
Primary Schools Attended				
(1)				
(2)				
(3)				

**(II) CURRENT SPONSOR**

Who is paying your fees:

Who is supporting you with upkeep?

**(iii) PREVIOUS SPONSOR**

Who paid your fees during:

- a) University/college:.....
- b) A Level: .....
- c) Secondary: .....
- d) Primary: .....

If guardian/well-wishers, what relationship do you have with this person .....

If organisation, please provide name and contact details:.....

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Provide historical background of how your education has been funded and any challenges encountered in financing your education

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E. LOAN AMOUNT FOR THE ACADEMIC YEAR			REQUIRED	APPLIED FOR
a) Tuition	MWK			
b) Upkeep	MWK			
c) Equipment and book	MWK	XXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXX	
TOTAL LOAN AMOUNT(Addition of a b and c) MWK				
Total Loan Amount in words:				

Please attach a copy of your University/College fees structure for the academic year

F. BANK DETAILS (Please provide your own personal account details)	
Account Name	
Name of Bank	
Branch	
Account Number	

G. DETAILS OF PARENTS	
(Where employed please attach parents latest payslip and if self-employed attach proof of income e.g. financial statement/ bank statement and if deceased provide death certificate)	
<b>i. FATHER Deceased/ Living (circle the appropriate )</b>	
Surname:	First Name:
Other Names:	Occupation:
Date of Birth:	
Postal Address:	Telephone(s):
Email Address:	Highest level of Education:
Current Residential Address:	Employer/ Nature of business:
Township/Village:	Monthly Income: MWK
T/A:	Other Sources of Income: MWK
District of Origin	Disability if any:
<b>ii. MOTHER Deceased/ Living (circle the appropriate)</b>	
Surname:	First Name:
Other Names:	Occupation:
Date of Birth:	

Postal Address:	Telephone(s):
Email Address:	Highest level of Education:
Current Residential Address:	Employer/ Nature of business:
Township/Village:	Monthly Income: MWK
T/A:	Other Sources of Income: MWK
District of Origin	Disability if any:
District of Origin:	

<b>iii. GUARDIANS</b>	
Surname:	First Name:
Other Names:	Occupation:
Date of Birth:	
Postal Address:	Telephone(s):
Email Address:	Highest level of Education:
Current Residential Address:	Employer/ Nature of business:
Township/Village:	Monthly Income: MWK
T/A:	Other Sources of Income: MWK
District of Origin	Disability if any:
District of Origin:	

Please attach copies of National IDs of your parents/guardian

<b>H. (i) DETAILS OF SIBLINGS (biological brothers and sisters)</b>				
Where a sibling is on any sponsorship, please provide details and if the space provided is not adequate, please attach additional information on a separate sheet of paper.				
Name	Current or last Institution/School attended	Level of Study/Class	Annual fees	Fees paid by
<b>(ii) DETAILS OF FAMILY DEPENDANTS</b>				
Name	Current or last Institution/School attended	Level of Study/Class	Annual fees	Fees paid by

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**I. FAMILY SOCIAL ECONOMIC INDICATORS**

1. Total number of children from biological/adopting/foster father.....
  2. Total number of children from biological/adopting/foster mother.....
  3. Are your parents living together? (Tick) Yes..... No.....
  4. If no, with whom do you live? (Tick) a. Father..... b. Mother .....
  - c. Others .....
  5. Type of Family accommodation. (Tick)
    - a. Rented..... b. Owned..... c. Employer’s.....
    - d. Other (please Specify).....
  6. Type of House. (Tick) a. Permanent .....
  - b. Grass thatched.....
  7. Number of rooms in the family house.....
  8. Average Household monthly expenditure.....
- Please provide estimated monthly expenses incurred by your family, **where applicable on the following:**
- i. Rent.....
  - ii. Food.....
  - iii. Clothing.....
  - iv. Utilities.....
    - a. Water.....
    - b. Electricity.....
    - c. Gas.....
    - d. Charcoal.....
    - e. Paraffin.....
    - f. Firewood.....
    - g. Airtime.....
    - h. Pay TV.....
    - i. Transport.....
    - j. Fuel for motor vehicle/motor cycle
9. Assets owned by family: (tick against the asset your family possess)
- a. Car
  - b. Farm
  - c. Ox-cart
  - d. fishing Boats
  - e. maize mill
  - f. fish pond
  - g. Livestock
    - i. Cow

- ii. Goats
- iii. Pigs

h. Average 50kg bags of harvest per year:

- i. Maize.....
- ii. Groundnuts.....
- iii. Soya beans.....
- iv. Beans.....
- v. Pigeon peas.....

10. Where does your family seek medical care?

- i. Private Missionary Hospital (specify).....
- ii. Public Hospital (specify) .....
- iii. Private Commercial Hospital/Clinic. (specify).....
- iv. Others (specify).....
- v. Name of Medical Cover (specify).....

11. What means of transport does your family use?

- a. Private means (specify).....
- b. Public means (specify).....
- c. Employer’s Motor Vehicle (specify).....
- d. Bicycle (specify).....
- e. Other (specify).....

12. Please give reasons why you must borrow from HESLGB to finance your University / Tertiary Education

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**J. RECOMMENDATIONS (For newly admitted students or continuing students applying for the first time. Please ensure that either of the Authorities below complete the form accordingly)**

OFFICIAL (please insert Name, Phone Number & Signature)	RECOMMENDATION (on the eligibility of the applicant)	OFFICIAL STAMP
Head Teacher of previous School/ Institution attended		

Religious Leaders: (Priest, Pastor, Sheikh e.t.c)		
Group Village Headman/Chief, District Education Manager(DEM), District Commissioner(DC)		

**K. Applicants check list** (Cross Check whether all required information is attached. Tick Appropriate, this is a MUST)

- i. 2 passport size photos:
- ii. Deposit slip of the Processing Fee:
- iii. Copy of applicant's National ID:
- iv. Copy of applicant's University/College Student ID:
- v. Copy of University/College's admission letter:
- vi. Copy of Parent's/Guardian's ID:
- vii. Copy or copies of death certificate(s)(where available) if orphaned:
- viii. Copy of the MSCE/ "O" Level result slip:
- ix. Append signature on each and every page of this document:
- x. Copies of father's/Mother's/Guardian's pay slips (where applicable):
- xi. Copy of marriage certificate (where applicable):
- xii. Sketch map to applicant's home of origin:
- xiii. Any other documents or information that would support your application:

**L. DECLARATIONS BY APPLICANT**

I am aware that the Board, at my cost, will protect its funds, i.e. the Students' Loan against any such risk for such amounts which the Board has approved and disbursed to me. In the event that any Student's Loan is granted and accepted by me, I agree to be bound by the rules, terms and conditions of the Board, and I undertake to sign all such documents as may be required to secure a Loan from the Board. I acknowledge liability for all costs that shall be incurred by the Board to recover its funds from me. The costs may include processing fees, documents verification and Legal expenses that the Board may incur while pursuing the loan recovery. I further acknowledge that the commitments I have made in this application shall continue to bind me from now onwards until the entire loan is fully paid and I accept full responsibility and shall fully indemnify the Board.

I undertake to notify the Board of any change which materially changes any representation first above mentioned.

I, the Applicant, hereby consent to you, the Board: Receiving, compiling and retaining any confidential credit information about me for purposes of (i) assisting you perform your statutory assessment of my creditworthiness (ii) deciding whether to grant loan to me and (iii) monitoring my credit profile, should you grant me loan;

I acknowledge that under Section 27 of the Higher Education Students Loans and Grants Act, I am required to start repaying the loan within two years upon successful/unsuccessful completion of the course for which the loan is granted or upon earlier termination of such course for any reason or cause whatsoever.

I further hereby consent to the Board to share this information with the Credit Reference Bureaus (CRBs) or any other credit providers that might need it.



My signature hereto signifies my consent as aforesaid and my agreement to hold you and any credit bureau and other credit provider to whom you may provide my consumer credit information in terms of my aforesaid consent harmless against any and all liability, loss, claim, demand, cost, fees and expenses arising out of or from or in connection with my aforesaid consent.

I hereby declare that the above information is true, and that I am aware that making false statements on this form is an offence punishable by law. I further declare that I clearly understand that this is a Loan which shall be repaid.

Name: .....

Signature: .....

Date: .....

Telephone Contact: .....

Email: .....

**M. Confirmation on understanding of the Student Loan**

Do you understand that the loan applied for need to be repaid upon successful/unsuccessful completion of your studies? **Yes:..... No:.....**

**N. Parent/ Guardian/ Guarantor**

I declare that I have read this form or this form has been read to me and I hereby confirm that the information given herein is true to the best of my knowledge.

Name: .....

Telephone Contact:.....

Mobile .....

Residential Physical Address: .....

Employer (if applicable): .....

Employer's Physical Address: .....

Relationship with Applicant: .....

Signature: .....

Date: .....

**O. DEAN OF STUDENTS (Only for continuing students)**

I confirm that the applicant is indeed a needy and deserving student for the loans and I hereby state that the information given here is true to the best of my knowledge.

Name: .....

Signature: .....

Date: .....

OFFICIAL STAMP.....

**P. FOR OFFICIAL USE ONLY**  
**HESLGB RECOMMENDATION**

Amount MWK.      **Tuition:** .....

   Equipment and book.....

**Upkeep:** .....

**TOTAL:** .....

I have verified the authenticity of the student's admission letters.  
 Comments.....

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Name.....

Position .....

Signature .....

Date.....

Official Stamp.....

Approval Stamp.....

**Q. LOAN APPLICATION FEE**

All applicants are strictly required to DEPOSIT a non-refundable application fee of MK5,000.00 STRICTY CASH Deposit.

Bank Name	National Bank of Malawi
Account Name	Higher Educations Students Loans
Account Number	1001932884
Branch	City Center

OR

Bank Name	NBS Bank
Account Name	HESLGB Loans
Account Number	21942243
Branch	Capital City

Note: A copy of the deposit slip bearing the name of the applicant and University/College should be attached to the application form. Bank deposits will be verified.

## R. SUBMISSION OF AN APPLICATION FORM

A duly completed application form together with a bank deposit slip showing the name of the applicant and any other relevant attachments should be submitted to:

- 1). University/College administrators for continuing students
- 2). The following address for newly selected students

The Executive Director  
The Higher Education Students' Loans and Grants Board  
Private Bag B417  
Lilongwe 3.

Physical Address: Higher Education Students Loans and Grants Board, Area 10, Off Mphonongo Street, Plot Number A/517 Opposite Kulemeka Gardens.

### **NB:**

- i. Dully filled application form should be submitted to the Board on or before the close of the application window;***
- ii. Any late application will not be considered.***