## **Margibi University**

## Department of Admissions, Registration & Records

Harbel, Margibi County

<u>Republic of Liberia</u>

Semester I, 2025 Application Form

			1. P	ersona	l Informatio	n			
Last Name	Mr./Mı	Mr./Mrs./Ms. First Nam		Middle Name		Sex		e of Bi	
						(M) (F)	М	D	Y
Contact Number									
			2.	Curre	ent Address				
Village/Town			City		Co	ounty		Count	try
			3.	Plac	e of Origin				
Nationality		Coı	unty of Origin		N	lame of Distric	t	П	)istrict #
		<b>4.</b> I	Marital Statu	s and I	Religious Affi	liation			
Marital Status					Religion	/Denomination	ı		
Married ( ) Sing	gle ( )								
		5.	Parental an	d Spoi	nsor Informa	tion			
Parent(s)/Gua	ırdian(s)			Town	/City/Village	County	'Country	Cell	#
Father's Name:									
Mother's Name:									
Sponsor's Name:									
Name of person to contact in	n case of Ei	nergenc	:y:				Cell #:		
			<b>6.</b> ]	Emplo	yment Status				
1 10			If yes, pleas	se prov	ide the name,	address and co	ell # of yo	ur emp	loyer.
Are you employed? Yes ( )	No()		V 3 3				0.11	ш	
Name:			Address:		Cell #				

	7. References	
Provide the names and contacts of the (3) years.	ree persons who are not related to you, wl	nom you have known for at least three
	Name	Cell #
Reference # 1		
Reference # 2		
Reference # 3		

8. Previous Education		
Name of Last School attended	Did you graduate?	Date of Graduation

9. Educational Plan			
Category of Student	Intended term of Entry		
Full time ( ) Part-time ( )	1st Semester ( ) 2nd Semester ( ) Vacation School ( )		

10. If transferring from another University , List College			
	Name of College	Address	Credit Hours
			Accumulated
1			
2			
3			

## **DO NOT WRITE BELOW THIS LINE**

		13. Official Endorsement	
Interviewed by	Title	Endorsed by Enrollment Counselor	Date
Enrolled Yes() No()	Date:		
Enroned Tes() No()	Date.		
	Co	oncerns/Comments	
	u.	sheer not commented	
		11. Disability or Impairment	
D 1 1: 1:1:			
Do you have any disability that	would hinder you	ır study at the university? If yes, please explai	n:

## 12. Certification

I certify that the above information is correct to the best of my knowledge. I understand that giving false information may make me ineligible for admission to the Margibi University (mu).

Signature of Applicant

**Date**