



APPLICATION FORM FOR DEGREE STUDIES IN 2027

THIS FORM SHOULD ONLY BE COMPLETED BY APPLICANTS WHO HAVE COMPLETED A DIPLOMA PROGRAM AT DIVINE WORD UNIVERSITY OR FROM OTHER RECOGNISED INSTITUTIONS. THIS FORM CAN BE EMAILED IN.

The Degree Application needs to be accompanied with a non-refundable administration fee of K100.00
All parts of the application must be completed

PART 1: PERSONAL INFORMATION

Field	Details
Full Name	
Current accessible mobile number	
Nominated Email Address	
Current Residential Address	
Last Institute studied at	
Name of last program studied	
Year of completion of last program studied	
Gr12 SLF Number	
Student ID number	
Date of Birth	
Gender	
Home Province	
Religion	
Marital Status	

PART 2: EDUCATION, TRAINING AND EMPLOYMENT

Please provide your *transcripts*. All applicants must attach all academic transcripts - senior high school, university, etc. **Diploma holders from other Institutions must also provide the Program/Course content of your Diploma.** These documents must be certified as true copies of the original by a Commissioner of Oaths, Justice of Peace, a practising Lawyer or a Magistrate at the Court House and must be currently dated.

Any documentation not properly certified by one of the above will result in your application not processed.

I am applying for the Degree Program in *(Tick Only One Program of your choice)*

- Bachelor of Communication Arts (Journalism)
- Bachelor of Arts (Papua New Guinea and International Studies)
- Bachelor of Arts (Social & Religious Studies)
- Bachelor of Arts (Social Work)
- Bachelor of Business (Accountancy)
- Bachelor of Business (Management)
- Bachelor of Information Systems
- Bachelor of Mathematics and Computing Science
- Bachelor of Tourism & Hospitality Management
- Bachelor of Environmental Health
- Bachelor of Health Management

I completed my DWU Diploma in the Department of _____ in _____
(year)
OR

I completed a university Diploma in _____ at _____ in _____
(field of studies) (University) (year)

Work Experience (List most recent position first)

Date of Employment	Name of Employer	Address	Position/Responsibility

PART 3: REFERENCES

A) PRESENT EMPLOYER'S REFERENCE: You must attach a reference from your present employer concerning your work duties/performance, your acceptance of job related responsibilities, your demonstrated behaviour/character both on and off the job, and your employer's perception of your commitment to becoming a professional in your field.

B) COMMUNITY OR RELIGIOUS LEADER'S COMMENTS: On the applicant's involvement in the local church and witness to faith.

Full Name: _____ Signature: _____ Parish/Area: _____

Date ____/____/____

FEE

Who is paying your fee? Tick the appropriate box.

Self Sponsor – Name your sponsor _____

Refer to the current 2026 DWU Fee Schedule via the DWU website for fee information and to prepare accordingly. Fees are subject to change and may increase in 2027.

Applicant's Signature: _____ Date: _____

Applications must be submitted by **31 July, 2026 via email by 11:59 pm (GMT+10)** and must be accompanied with an Administration Fee of K100.00 The application form will not be processed if these payment is not made in full.

This fee is to be paid into the following bank account:

Bank Name: Bank of South Pacific
Account Name: Divine Word University School Fee Account
Account Number: 1000433806
Bank Branch: Madang 960 Branch, Coastwatcher's Avenue
BSB# 088-960 Swift Code: BOSPPGM
Mobile Banking School Code: 50015

Ensure that you quote the following information on your deposit slip as it is essential to identify payment correctly. i.e. your full name, program you are applying for. The receipt should be attached to this Application Form.

Applications to be submitted by:

Post: **The Registrar, Divine Word University, PO Box 483, Madang, Madang Province**

Email: mcnsl@dwu.ac.pg