

SUNSHINE PRIVATE COLLEGE

Application for Admission January 2026

Passport Photo

This application is not binding on either the applicant or the College. All information supplied will be treated as confidential. A non-refundable N\$200 Application Fee is charged. NB: Online application is free.

		I I			6		T I					
Instructions:					Doo	cum	ents ch	ecklis	t: (Pleas	se mar	k enc	losed)
Use BLOCK LETTERS to complete this form. In the square box provided, put an 'X' appropriately. Please note that incomplete applications may be rejected. ALL CERTIFICATES MUST BE TRUE CERTIFIED COPIES of the original. Submitted documents will be filed and are not returnable.					To be attached to the Application Form Certified ID Certified Birth Certificate Certified School Leaving Certificate 1 Passport Size Photos NQA Evaluation Report (if applicable) 2nd Term School Results, (If applicable) Certified by School Principal							
For Official Use O	nly:											
Application Receipt	N0.				Total Points Obtained Symbol in English							
Section A: Person	al Details											
Title	Mr	Иs	Others			C	Gender	M	F			
Surname						N	Maiden N					
First Names (s)									Init	ials		
Marital Status						Ι	Date of B	irth	DI	M	M	Y Y Y Y
ID/Passport No.												
Home Language						I	Home To	wn				
Home Address												
Postal Address												
Telephone						1	Mobile					
Email Address						1	Religion					
Citizenship												
Do you have any disal	bility?	Yes	N	0								
If "Yes" please specif	y.											
Based on your disability, do you have spo			ecial needs	?		Y	Yes	No				
If "YES", please briefly state your additional special needs based upon the indicated impairment or disability.												
Indicate whether you are:			inalised		Orphan		Vulnera	ole	Alt	ino		

Relationship	Father	Mother	Spo	use		Other			
Name and Surname				,					
Postal Address									
Home Address									
Telephone						Mobile			
Occupation					·				
ID Number									
Section C: Choice	of Progr	amme and	Mode of	Stud	у				
Mode of Study	Full-time	Part	-time	Onl	ne				
Preferred entry point	Normal		Mature			Others s	pecify		
First Choice									
Second Choice									
Specialization									
Choose preferred examinate	on centre								
Examination Centre	Windho	ek Os	hakati						
Name of Person / Insti	tution Resp	ponsible for I	ayment						
ID if person									
Email Address									
Telephone / Mobile									
Postal Address									
Source of fund									
Employment Details									
Name of Employer									
Occupation									
Physical Address									
Employers Contact									
Continu E. Himb Cob	a al Attar								
Section E: High Sch Secondary education details			ool report / school le	aving certific	ate)				
Name of School		, ,	,	J		R	egion of	School	
Examination Board			Exar						

Section B: Next of Kin Details

Please list, in the table below, all your High School subjects (e.g. Mathematics, English), the level in which you graduated, e.g. NSSCO/H /NSSCAS/IGCSE, (O' Level or A-Level) and the symbol (e.g. A, B, C or 1, 2, 3):										
Subject					I	Level	Syml	ool		
				l						
Previous/Current Tertiary Stu	udies (Deg	rees/Diplomas Only)								
Qualification Name (De	egree or I	Diploma Name)								
Name of Institution/Tertiary					Year Ob	tained				
Section F: Employme	nt Deta	ils								
Employer Name										
Occupation										
Postal Address										
Contact Details	Contact Details									
Physical Address	Physical Address									
Section G: Additional S	Statistical	Details								
Region of Origin (Where you we										
Omusati				Omaheke						
Khomas				Kavango East						
Erongo				Kavango West						
Zambezi				Oshana						
Otjozondjupa				Oshikoto						
Kunene				Ohangwena						
Hardap				Karas						

Other (Foreign Student)

PLEASE NOTE

- Enclose all supporting documentation with this application (all documents must be certified by a recognized authority).
 Please note that incomplete documentation may delay the application process and or may cause the application to be rejected.
- 2. This application is the property of Sunshine Private College. Supporting documentation will NOT be returned.

Please DO NOT SUBMIT ORIGNALS, but only officially certified true copies.

Declalation

I hereby declare that all the information and particulars given in this application form are true and correct. I fully understand that if any information provided in this form is found to be incorrect and misleading, my application may be rejected or I may face legal action. I further declare that my enrolment as a student at Sunshine Private College shall be subject to the terms and conditions contained in the agreement, which I shall complete, sign and submit at registration.

and conditions contained in the agree	ment, which I shall complete, sign and submit at registration	
SIGNATURE OF APPLICANT	DATE	D D M M Y Y Y Y
SIGNATURE OF GUARDIAN (If applicant is under 21 years of agelif applicant is not responsible for fees payment)	DATE	D D M M Y Y Y Y

Bank Details

SUNSHINE PRIVATE COLLEGE

Standard Bank of Namibia

Account Number: 60004895753 Account Type: Business Cheque Account

Branch Name: AUSSPANNPLATZ Branch Code: 082672

EFT TRANSFER: 087373 SWIFT CODE: SBNMNANX

This application form should be accompanied by a copy of an official receipt from Sunshine Private College or a copy of Proof of Payment (Bank Deposit Slip) of N\$200 (Two Hundred Namibian Dollars).

CONTACT DETAILS

Please submit your fully completed Application Form to:

Sunshine Private College, P. O Box 40529, Ausspannplatz Windhoek,
Namibia, or Erf 676, Schweitzer Street, Windhoek West, Windhoek, Namibia, or
Email: admissionstertiary@sunshine.edu.na or Call Sunshine Private College Office: +26461221805 or
+264 812 885 258.

