

DAYOSISI YA KASKAZINI MASHARIKI
KANISA LA KIINJILI LA KILUTHERI TANZANIA
CLINICAL OFFICERS' TRAINING CENTRE BUMBULI

Telephone: 027-2640353

Fax: 027-2640353

Email: bumbuli.cotc@yahoo.com



P.O.Box 9,
Bumbuli, Tanzania.

APPLICATION FORM ORDINARY DIPLOMA
ACADEMIC YEAR 2019/2020

SEPTEMBER INTAKE

	PROGRAMMES	MINIMUM ENTRY QUALIFICATIONS
1.	Ordinary Diploma in Clinical Medicine (Direct Entry)	Holders of Certificate of Secondary Education Examination (CSEE) with four (4) Passes in non-religious Subjects including "D" Passes in Chemistry, Biology and Physics/Engineering Sciences a Pass in Basic Mathematics and English Language is an added advantage.

Applicants should pay a non refundable fee of thirty thousand shillings (TZS. 30,000) to ELCT-NED CLINICAL OFFICERS' TRAINING CENTRE NMB Bank Account No. **41601300005** attach the Bank Pay-in slip to the filled in application form as evidence of payment of application fee.

. Application forms duly filled in should be returned to one of the addresses above not later than 08/09/2018.

1.0 PERSONAL DETAILS:

1.10 Firstname:

1.11 Middlename:

1.12 SurnameName:

(NOTE: THE NAMES ENTERED IN THIS FORM MUST BE EXACTLY THE SA.ME AS THOSE APPEARING ON YOUR SECONDARY SCHOOL O-LEVEL CERTIFICATE)

1.2 Sex: Male/Female.....1.3 Date of Birth.....

1.4 Place of Birth:1.5 Religion

1.6 Marital Status:..... 1.7 Citizenship

1.8 District:1.9 Region:

1.10 Postal Address:

1.11 Applicants Mobile No(s): E-mail Address.....

1.13 CLOSE RELATIVE (NEXT OF KIN) DETAILS:

1.14 Full Name.....1.15 Phone No.....

1.16 Postal Address.....1.17 Region.....1.18 District.....

DO YOU HAVE ANY KIND OF DISABILITY? YES/NO. IF YES, PLEASE SPECIFY:

.....

(NOTE: THIS INFORMATION IS REQUIRED FOR THE INSTITUTION TO ARRANGE APPROPRIATE MEANS OF ASSISTING YOU ONCE ADMITTED. IT WILL IN NO WAY AFFECT THE DECISION TO ADMIT YOU).

2.0 EDUCATION AND EMPLOYMENT BACKGROUND:

2.1 Certificate of Secondary Education Examinations (CSEE)/National Form IV/or Equivalent

(Attach copy of certificate)

School	Index No.	Year of Completion	Subject	Grade
			PHYSICS	
			CHEMISTRY	
			BIOLOGY	
			ENGLISH	
			B/MATHEMATICS	
			GEOGRAPHY	
			CIVICS	
			KISWAHILI	
			HISTORY	

Examination Authority:Division:

Examination Centre or School: Country:

2.2 Certificate of Advanced Secondary Education examination (ACSEE)/National Form VI/or Equivalent

(Attach a copy on the form).

School	Index No.	Year of Completion	Subject	Grade

Examination Authority:Division...

Examination Centre or School:Country:

2.3 Other courses

2.4 Employment

Job held	Name of Employer	Since	Until

3.0 SPONSORSHIP (IF ANY) AND APPLICATION FEE:

3.1 Sponsor:

.....

3.2 Give full address, relationship and a confirmation letter from your sponsor(s).

.....

.....

3.3 Indicate your name as written in the Bank-Pay-in-Slip of the non refundable application fee:

.....

4.0 DECLARATION:

I declare that all information given on this form is true and correct to the best of my knowledge.

Signature of Applicant:

Date:.....

Note 1: The information given in this form will be used for admission purpose only. Non-disclosure of details or provision of false information to any of the section in this form, if discovered, shall render your registration cancelled.

Note 2: Important Attachments:

- i Certified copies of relevant academic certificates
- ii NECTA equivalent translations (for those with foreign Secondary certificates)
- iii Certified copy of Birth Certificate
- iv Original Bank Pay-in-slip of Application fee
- v One coloured recent photo

FOR OFFICAL USE ONLY

Application form has been received by the Registrar/Admission Officer

Name of Officer:

.....

Signature:Date:

Decision by the Pre-Selection Committee:

Decision by the Academic Affairs Committee: