

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

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P.O.Box 9,
Bumbuli, Tanzania.

DIPLOMA (UPGRADING) APPLICATION FORM
PROGRAMME- ACADEMIC YEAR 2019/2020

SEPTEMBER INTAKE

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 admission office **BUMBULI COTC** above not later than **02/09/2019**.

	PROGRAMME OFFERED	MINIMUM ENTRY QUALIFICATIONS
1.	Diploma in Clinical Medicine (Upgrading)	Holder of Technician Certificate (NTA level 5) in Clinical Medicine with "D" pass in Biology, Chemistry or Physics (CSEE) for the graduates starting from 2010; OR Graduates before NTAs system should have certificate in Clinical Medicine and at least D Pass in any of science subject; Necessary Attachments: Technician Certificate and Transcript in Clinical Medicine and Letter of permission from employer for graduates before 2015.

1.0 PERSONAL DETAILS:

1.10 Firstname:

1.11 Middlename:

1.12 SurnameName:

(NOTE: THE NAMES ENTERED IN THIS FORM MUST BE EXACTLY THE SAME 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

Institution Attended	Year of Completion	NTA LEVEL 5 EXAMINATION NUMBER

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).

.....

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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 OFFICIAL 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: