

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.

APPLICATION FORM ORDINARY DIPLOMA IN CLINICAL MEDICINE
ACADEMIC YEAR 2020/2021

SEPTEMBER INTAKE

PROGRAMMES	MINIMUM ENTRY QUALIFICATIONS
Ordinary Diploma in Clinical Medicine (Direct Entry)	Holders of Certificate of Secondary Education Examination (CSEE) with four (4) minimum Passes in non-religious Subjects including " D " Passes in Chemistry, Biology, Physics/Engineering Sciences , and 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 **20/09/2020**

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
(PLEASE ATTACH COPY OF FORM FOUR CERTIFICATE)

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

Examination Authority:Division:
Examination Centre or School: Country:

3.0 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 Copy of form four academic certificates
- ii NECTA equivalent translations (**for those with foreign Secondary certificates**)
- iii Copy of Birth Certificate