



CHRIST AMBASSADORS TRAINING COLLEGE

KAHAMA TANZANIA.

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ASSOCIATE OF

WORLD MIRACLE MISSION CENTRE, P.O BOX 78620, DAR ES SALAAM.

Phone: +255 754 692019/,+255 684 637 782 E-mail:

pastorjustice@gmail.com au pastorjustice@worldmiraclemission.org

REG: N.5230

Website: www.worldmiraclemission.org

STUDENT APPLICATION FORM

Attach three colored passport size

(Carefully read the ‘Instruction to Applicants’ before filling in this application form. This form can be type or handwritten)

Academic Year for which admission is sought (e.g. 2016/2017

CHOICE OF CERTIFICATE PROGRAMMES IN DESCENDING ORDER OF PREFERENCE

In the table below, enter the Certificate Programme you would like to study in descending order of preference. Details of the Certificate programme are given in the “Instruction to Applicants”

Choice of Programme	Department	Programme	Full Name of Programme as Indicated in the Instruction to Applicants.
First choice			
Second choice			
Third choice			

Section 1: Applicant details (Please complete in BLOCK letters or types)

Last Name								
First Name		Middle Name						
Date of Birth			Nationality					
Gender	Male	Female	Marital status	Single	Married	No. of children		
Do you consider yourself to have a disability?			Yes	No	Do you have a criminal conviction?		Yes	No

Permanent Home Address		Address for correspondence (if different from Home Address)	
City		City	
Country		Country	

Telephone		Telephone	
Email	<i>Please write your e-mail address clearly</i>		
Section 2: Education Details (your qualifications must demonstrate eligibility for the course complete in BLOCK letters or types)			

List all academic qualifications that you achieved such as Primary education, “O”, “A” level grade or equivalent. Copies all relevant certificate must be attached.

Qualifications	From	To	School / College / University	Grade/Division

Section 3: Accommodation (tick \sqrt if you need accommodation) YES <input type="checkbox"/>	NO <input type="checkbox"/>
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All residents are required to sign an accommodation tenant agreement form / contact before allocated to the room. In a room you will find a bed, mattress and keys.

Section 4: Finance

Indicate how you intend to finance your studies and your living expenses at Mpera.

How will you finance your studies at CATC? Family <input type="checkbox"/> Employer <input type="checkbox"/> Loan <input type="checkbox"/> Savings <input type="checkbox"/> Other <input type="checkbox"/>			
Parents / Guardians		Job Title	
Telephone No.		E-mail	
Sponsor declaration: I have agreed to Finance the above named applicant in his / her studies at CATC and agreed to release funds for tuition fees and living expenses as and when required.			
Signed: _____ Name _____ Date _____			

Section 5: References (Please complete in BLOCK letters or types).

Please provide the names of two referees; at least one should be an academic referee who has knowledge of your academic ability.

Referee Name	Address	Telephone	E-mail

Section 7: fee structure

THE FEE IS PAYABLE IN FULL OR IN FOUR (4) INSTALLMENTS AT THE BEGINNING OF EACH YEAR OR SEMESTER AS INDICATED BELOW.

DESCRIPTION	HOSTEL (TSHS)	MONTH OF PAYMENT
FIRST INSTALLMENT	400,000/=	NOVEMBER 2016
SECOND INSTALLMENT	350,000/=	FEBRUARY 2017
THIRD INSTALLMENT	350,000/=	MAY 2017
FORTH INSTALLMENT	350,000/=	JULY 2017
TOTAL FEE PER ANNUM	1,450,000/=	

Payments shall be to CRDB BANK A/C NO. 0112482819000 MARCO PHILIPO NGHOLPE.

Other payments: TO THE BARSAR CHRIST AMBASSADORS TRAINING COLLEGE.

- Bring the bank pay – in slip with the name of the applicant to the college on reporting.
- Upon Return of this form, bring the RECEIPT of the application fee of Tshs. 20,000/=