

“TANGAZO - TANGAZO - TANGAZO”

UTARATIBU COLLEGE OF HEALTH, ALLIED SCIENCE, AND VOCATIONAL TRAINING



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UNDER

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

Phone: +255 754 692019/+255 755 470 924, E-mail:

pastorjustice@gmail.com au pastorjustice@worldmiraclemission.org

REG: N.5230

Website: www.worldmiraclemission.org

TANGAZO LA NAFASI ZA MASOMO.

Kufuatia tangazo hili watu wote wanaopenda kujiunga na kozi hizi, watume maombi yao. Ifikapo Tarehe 07 Septemba, 2016 Chuo kitaanza kusajili Wanachuo wa mwaka wa kwanza.

A. Muda wa Mafunzo:

- UHUDUMU WA AFYA (COMMUNITY HEALTH WORKER): Mwaka mmoja (1) Awe amemaliza kidato cha nne na ufaulu wake uwe wa kiwango kisichopungua alama ‘D’ kwa masomo mane (4), somo la Bailojia (Biology) likiwa ni la lazima.
- WATOAJI DAWA MUHIMU (DISPENSERS): Mwaka mmoja (1) Awe amemaliza kidato cha nne na ufaulu wake uwe wa kiwango kisichopungua alama ‘D’ kwa masomo manne (4) somo la Bailojia (Biology) likiwa ni la lazima.
- HUDUMA YA KWANZA (FIRST AID): Mwaka mmoja (1)
- UCHIMBAJI, UTAFITI NA UZALISHAJI WA MADINI (MINING ACTIVITIES) (Miaka miwili)
- UALIMU WA CHEKECHEA (NUSERY SCHOOL TEACHING) Mwaka mmoja (1)
- KUUNGA NA KUCHOMELEA VYUMA (WELDING AND FABRICATION) Mwaka mmoja (1)
- USIMAMIZI WA HOTEL (HOTEL MANAGEMENT) Mwaka mmoja (1)
- USIMAMIZI WA WATALII (TOURISM MANAGEMENT) Mwaka mmoja (1)
- UMEME MAJUMBANI (ELECTRICAL INSULATIONS) Mwaka mmoja (1)
- UFUNDI WA MAGARI (MECHANICS) Mwaka mmoja (1)
- UDEREVA (DRIVING) (Miezi mitatu)
- UJASILIAMALI (INTERPRENUESHIP) (Wiki mbili)

B. Muhula wa masomo unatarajiwa kuanza Tarehe 07 Septemba 2016.

C. Utaratibu wa kujiunga; Maombi yote yatumwe chuoni moja kwa moja baada ya kujaza fomu ya kujiunga na kuambatanisha vivuli vya vyeti au matokeo na viambatanisho vingine vilivyoainishwa katika fomu ya kujiunga.

Fomu za kujiunga zinapatikana chuoni UTARATIBU IRAMBA BOMANI au kupitia tovuti www.worldmiraclemission.org:

Au piga Phone: 0683 608356/0746 459329/0753 655656 E-mail:- amuaemen@gmail.com



P.C

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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. 2017/2018

CHOICE OF CERTIFICATE PROGRAMMES IN DESCENDING ORDER OF PREFERENCE

In the table below, enter the Certificate Programmes you would like to study in descending order of preference. Details of the Certificate programmes 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 <i>(your qualifications must demonstrate eligibility for the course complete in BLOCK letters or types)</i> | | | |

List all academic qualifications that you achieved “O”, “A” level grade or equivalent. Copies all relevant final transcripts must be attached with this application.

| Qualifications | From | To | School / College / University | Grade / % Marks |
|-----------------------|-------------|-----------|--------------------------------------|------------------------|
| | | | | |
| | | | | |
| | | | | |

List any results you are awaiting and including anticipated grades

| Qualification / Course / examination | Exam date | School / college / University name | Expected grade |
|---|------------------|---|-----------------------|
| | | | |
| | | | |
| | | | |

Section 3: Employment Details: *(Important in you are applying as a mature age entry).*

Please give details of positions held over the past 5 years, If you are applying as mature – age or for admission as a post graduate, provide detailed job descriptions on separate page and attach documentary evidence, e.g. reference letters from employers.

| Employer name | Address | Position held | From | To |
|----------------------|----------------|----------------------|-------------|-----------|
| | | | | |
| | | | | |
| | | | | |

Section 4: Accommodation *(tick if you need accommodation)*

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 5: Finance

Indicate how you intend to finance your studies and your living expenses in Iramba.

How will you finance your studies at UTARATIBU? Family Employer Loan Savings Other

| | | | |
|----------------------------|--|------------------|--|
| Parents / Guardians | | Job Title | |
| Telephone No. | | E-mail | |

Sponsor declaration: I have agreed to Finance the above named applicant in his / her studies at UTARATIBU and agreed to release funds for tuition fees and living expenses as and when required.

Signed: _____ Name _____ Date _____

Section 6: 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

Payments shall be to UTARATIBU Bank accounts at NMB Bank plc

Tuition fee: UTARATIBU Tuition, Account No. 50610006177

Other payments: UTARATIBU COLLEGE

- Bring bank pay – in slips to the college
- The fees are payable in full or in two installments at the beginning of each academic year / semester.
- Upon Return of this form, bring the pay – in slip of the application fee of Tshs. 30,000/= Paid to UTARATIBU Account No. 50610006177

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Section 8: Fee descriptions

| DESCRIPTION | DAY (TSHS) | HOSTEL (TSHS) | PLACE OF PAYMENT |
|--|------------------|------------------|-----------------------------|
| Tuition Fee Per annum | 800,000 | 800,000 | TO NMB BANK PLC |
| Registration fee per semester | 10,000 | 10,000 | TO THE COLLEGE PRINCIPAL |
| Pharmacy council Exams fees | 150,000 | 150,000 | TO NMB BANK PLC |
| NACTE Quality assurance fee | 15,000 | 15,000 | TO NMB BANK PLC |
| Accommodations per annum | 0 | 250,000 | TO THE COLLEGE PRINCIPAL |
| Practicum guide & filed attachment fee | 160,000 | 160,000 | TO NMB BANK PLC |
| Caution money (paid once) | 50,000 | 50,000 | TO THE COLLEGE PRINCIPAL |
| Identify Card (paid once) | 10,000 | 10,000 | TO THE COLLEGE PRINCIPAL |
| Students union (UTARATIBU) fee per annum | 10,000 | 10,000 | TO THE COLLEGE PRINCIPAL |
| Ream A4 | 15,000 | 15,000 | TO THE COLLEGE PRINCIPAL |
| TOTAL COST TO COLLEGE | 1,220,000 | 1,470,000 | |