

# THE OPEN UNIVERSITY OF TANZANIA

# **General Application for Admission FORM**

(Certificate and Diploma programmes)

Ref: .....

					PART I				
filling it, Regiona iet.traini	rst read the instructions under PART II of this form and then complete all sections of the form. If you need assistance in ing it, please contact any OUT Regional Centre or the Office of the Deputy Vice Chancellor (Learning Technology & egional Services), P.O. Box 23409, Dar es Salaam, Tel: 255-022-2668820/2668035, Fax: 255-0222668759, e-mail: <a href="mailto:t.training@out.ac.tz">t.training@out.ac.tz</a> The Open University of Tanzania website: <a href="http://www.out.ac.tz/iet">http://www.out.ac.tz/iet</a> ECTION A: GENERAL INFORMATION (See instructions on the reverse side of this FORM. Program information.								
Requested Program Session Interested							Region /	Academic	
	NTA Level 4	NTA Level 5	NTA Level 6	Morning	afternoon	Evening	Weekend	Centre	Year
2.	First Nan	ne(s):				(as c	on your Certil	ficates)	
3.	Full Mailin	g Address:							
	District:			Regio	on:				
	Country: .								
4.	Telephone	e: (Residen	ce):		Telefa	X:			
	(Workplac	ce):			E-mail:				
5.	Gender: N	/lale:			Fema	le:			

6.	Date of Birth:
7.	Marital Status: Married: Single: Divorce: Widowed:
8.	Occupation:
9.	Citizenship: (a) Tanzanian: (b) Non-Tanzanian:
	If you are not Tanzanian Citizen, and if you live in Tanzania, please indicate:
	<ul> <li>(a) Immigration document you poses (attach certified copy):</li> <li>Permanent Resident:</li> <li>Resident Permit Class C:</li> <li>Student:</li> <li>Other Types of Permit (specify below):</li> </ul>
10.	(b) Country of your Citizenship:
11.	As a student, do you have special needs related to physical/medical/ psychological/learning disability or other limitations?
	Yes: No: No: If yes, specify the disability of or other limitations:
12.	Have you ever applied and been selected to study at OUT before?: Yes: No:
	If <b>yes</b> , mention the programme and academic year  Programme:
13.	Have you ever been discontinued from any public University? Yes: No:
	If <b>yes</b> , state when and give reason(s):
14.	Are you currently enrolled in a programme at another institution? <b>Yes</b> : <b>No</b> :
	If yes: Name of the institution:
	Name of the academic programme:
	Qualifications expected:

	Completion date:							
SECT	TION B: EDUCATIO	NAL BACKGRO	UND:					
15.	Name all secondary scl	nools attended and the	e full name	of the cert	ificates) obtai	ned.		
	School	Location &Add	ress	Dates	attended	Ce	ertificate Awarded	
16.	List all nost secondary i	nstitutions and qualific	ations vou v	were awa	rded in order	of atte	endance. If more space is	
10.	needed, you may write	·	•	roio arra		or auto	ridanos. Il moro opaso is	
	Institution Name,	Institution	Date Att		tended		Award and	
	Location & Address	Status*	Fro (Month/		To (Month/Ye	ar)	Specialization	
_								
*Note	: 1. Institution Status of 2. Award and Specia							
17.	Are you an Open Unive	ersity of Tanzania staff	member?	Yes:		No	o: 🗀	
	If <b>yes</b> , please, give Nar	•						
18.	DECLARATION:							
	•	ed from time to time. I relevant information h y my admission if the in	certify that t as been wit nformation	the inform thheld. I a provided i	ation provided gree that the s false or inco	d abov Open omplet	te. I certify that I am not	

Date:.....

Signature of Applicant:....

# **PART II**

# IMPORTANT INSTRUCTIONS TO ALL APPLICANTS

All applicants must complete all sections of the General Application for Admissions Form carefully and legibly. If the University discovers that any information submitted by the applicant is false, it will reject that application and may refer the matter for legal action. Applicants should submit this form to our regional centres which are nearest to them. To register in a course.

#### **SECTION A: GENERAL INFORMATION**

All applicants must complete this section in full.

# **PROGRAM INFORMATION: (Number 1)**

All applicants must indicate preferred region of study. Centres available are: DSM, Mwanza, Kagera, Singida, Iringa, Manyara, Rukwa, Katavi, Kigoma, Shinyanga, Mbeya and Zanzibar (Unguja). The sessions available are: Moming, Afternoon, Evening and Weekend.

#### NAME: (Number 2)

Change of names by students after registration is not allowed. IET reserves the right to refuse any changes of names that are drastic, even when properly booked up by relevant laws of the land. Students should register in the names that appear in their certificates. The official order of names during registration will be; Sumame, First Name(s), Middle Name(s). Where a candidate has only two names in his or her certificates, then only those two names shall be used.

# **CITIZENSHIP** (Number 9)

All Applicants must indicate their citizenship. Failure to do so will result in the General Application for Admission FORM being returned and a delay in admission, enrolment and registration.

#### STUDENTS WITH SPECIAL NEEDS (Number 11)

If you have physical/mental/learning disabilities or other limitations which might affect your academic progress, tick "Yes" and give details on separate sheets of paper, if necessary.

### **SECTION B: EDUCATIONAL BACKGROUND**

All applicants must complete this section in full.

#### CHECKLIST

Have you included the following in your application? (Tick that which is applicable)

General application for Admission Form completed and signed					
Copies of Secondary School Certificates.					
Copy of Birth Certificate.					
Transcripts of all Post Secondary School Education (i.e., Diploma and Certificates. Successful applicants will be required to bring the originals for verification at the time of registration.					
Affixed your two coloured Stamp size photographs taken within the last three months (with your name written at the back).					
An original receipt (Bank Pay-in-Slip) indicating payment of the non-refundable admission fee.					
Evidence of sponsorship (or self sponsored).					
Application fee pay-in-slip worth <b>T.sh. 10,000/=</b> and <b>USD 30</b> , respectively, for Tanzanian citizens and Non-Tanzanians.					

Application fee payments should be deposited through NBC Ltd, City Corporate Branch A/c number **011103034857** or CRDB Bank, Kijitonyama Branch A/c number **01J1013520600**. Fee remittance by any other means shall not be accepted.