

MOSHI UNIVERSITY COLLEGE OF CO-OPERATIVE AND BUSINESS STUDIES (MUCCoBS)

The Constituent College of Sokoine University of Agriculture



DIRECTORATE OF RESEARCH AND POSTGRADUATE STUDIES

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APPLICATION FORM FOR POSTGRADUATE PROGRAMMES

(USE BLOCK LETTERS OR TYPESCRIPT)

This application form must be accompanied with the following:

- (i) Copies of academic transcripts
- (ii) Copies of all certificates from secondary school level
- (iii) Copy of birth certificate
- (iv) Proof of nationality for foreign applicants
- (v) Proof of payment of application fee
- (vi) Reference forms from academic referees should be enclosed in separate envelopes (This is does NOT apply for Postgraduate Diploma Applicants).

Once completed this form should be sent to the Director of Research and Postgraduate Studies, Moshi University College of Co-operative and Business Studies, Box 474 Moshi – TANZANIA, after paying a non refundable application fee of **Tshs. 30,000/=** through Account No. **01J/2036991800** CRDB BANK – MOSHI BRANCH (Name of Account: MUCCoBS STUDENTS' FEE ACCOUNT); Or thirty US dollars (30 US Dollars) for foreigners payable to MUCCoBS dollar ACCOUNT NO.**02J1038874400** CRDB BANK.

PART A PROGRAMME OF STUDY

Tick against the programme you want to apply for.

(i)	Doctor of Philosoph (PhD)	[]
(ii)	Master of Arts in Co-operative and Community Development-(MA-CCD)	[]
(iii)	Master of Arts in Procurement and Supply Management (MA-PSM)	[]
(iv)	Master of Business Management (MBM) – Fulltime	[]
(v)	Master of Business Management (MBM) – Evening	[]
(vi)	Postgraduate Diploma in Co-operative Business Management (PGD-CBM)	[]
(vii)	Postgraduate Diploma in Community Development (PGD-CD) - Fulltime	[]
(viii)	Postgraduate Diploma in Community Development (PGD-CD) - Evening	[]
(ix)	Postgraduate Diploma in Accounting and Finance (PGD-AF) - Fulltime	[]
(x)	Postgraduate Diploma in Accounting and Finance (PGD-AF) - Evening	[]
(xi)	Postgraduate Diploma in Savings and Credit Co-operative Societies	
` ,	Management (PGD-SACCOS)	[]

PART B PERSONAL PARTICULARS OF THE APPLICANT

1.	First Name:		
2.	Other Names:		
	Sex: Male ()	Female ()	
4.	Physical Address: Region	District	
	Village/Mtaa		
5.			
		Fax:	
	E-mail		
7.	Office: Tel:		
8.	Marital Status		
9.	Date of birth		
10.	Place of birth		
11.	Nationality		

PART C ACADEMIC QUALIFICATIONS

List all schools, colleges, universities or other education institutions you attended

School/College/	Country	DATES		DATES		DATES		Major field of	Certificates/Diplomas/
University		From	То	study	Degrees awarded				

PART D EMPLOYMENT PARTICULARS

Employment history (start with the most recent)

S/N	Name of Employer	Title/Position	Years	
			From	То

PART E ACADEMIC REFEREES

Provide names of two academic referees and ensure that they complete the attached reference form. The form should be sealed (signed on the closing envelope flaps) by the referee and returned by the applicant together with the application form.

Name of Referee (i)	Address
(ii)	
	PART F
	DECLARATION
I declare that the information given in	n this application form is complete and accurate to the
best of my knowledge. Further, I und	derstand that submission of forged documents and/or
false information is a criminal offence	e.
Signature of applicant	Date
	PART G
EMPLOYER'S R	ELEASE (WHERE APPLICABLE)
This is to certify that the employer sh	all release the applicant for studies.

Name of Organization:

Signature:	Date:
(Official Stamp)	