

# TUMAINI UNIVERSITY KILIMANJARO CHRISTIAN MEDICAL COLLEGE

Ref. No:

Attach 1 certified  
passport size  
photograph herewith  
your name clearly  
printed on the back  
of the photograph

## APPLICATION FOR ADMISSION TO UNDERGRADUATE DEGREE PROGRAMME

FORM NO. 1

**FOR OFFICIAL USE ONLY**

KCMC	JAB/FORM 1
CHOICE (1) .....	CHOICE (1) .....
CHOICE (2) .....	CHOICE (2) .....
CHOICE (3) .....	CHOICE (3) .....
CHOICE (4) .....	CHOICE (4) .....

NOTE: Two copies of this form when completed must be sent to the Provost  
Kilimanjaro Christian Medical College  
P.O Box 2240 Moshi, Tanzania

APPLICATION FOR ADMISSION TO A DEGREE COURSE IN THE YEAR.....  
(State year)

1. Last Name (block letters)  
.....
2. First name in full (block letters)  
.....
3. Middle name(s) in full (block letters)  
.....

NOTE: The name in which you will be registered will be that which appears on your A.C.S.E.E/Form VI or equivalent document offered as an entry qualification.

4. Date of birth

.....

5. Place of birth (i.e. Town or District and country)

.....

6. Religion

.....

7. Married or Single

.....

8. Sex (M or F)

.....

9. Citizenship

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10. Country of Residence

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11. Address to which information should be sent if applicant is successful.

Information will be sent to successful candidates only, normally during June,  
(see note below)

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NOTE: Change of this address must be communicated to the Provost

12. Secondary school attended (give details)

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13. (1) (a) Give brief details of further courses of study, if any

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(b) Employment record (Give dates)

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Post	From (date)	To(date)
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(2) Tanzania candidates should submit the following information

(a) Your present occupation and designation

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(b) Full name and address of employer

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14. Give the name of your last school Principal/Headmaster or another person to who reference can be made for a confidential report upon your suitability for University studies.

Name

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.....  
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Address

.....



Examination authority

.....

Division: .....Examination center/school

.....

.....Country

.....

\*It is important that Index Number should be given

16. Enclose a copy of the certificate(s) and transcripts, which show grades, obtained in each subject.

**17. Degree, Diploma and Certificate course at Kilimanjaro Christian Medical College, Moshi**

Indicate in the table below, all the courses for which you are applying. You should show your order of preference of courses by placing numbers on the right hand side in the table. You should use figure 1 to indicate your first choice, 2 for your second etc. You are advised to think very carefully before you fill in the table and to give as full a selection as possible, bearing in mind that the University may not be able to offer you your first choice.

<b>I Degree courses</b> Doctor of Medicine (MD) Bachelor of Science in Nursing (BSc.N) Bachelor of Science in Prosthetics/Orthotics	
<b>II Advanced Diploma courses</b> AMO Radiology Dermato-Venereology Ophthalmic Nursing AMO Anaesthetic Officer AMO Ophthalmology Officer	
<b>III Diploma courses</b> Optometry Physiotherapy Orthopedic Technology Occupational Therapy	

Clinical Laboratory Science	
<b>IV Certificate Courses</b>	
Health Record Technology	

18. Have previously attended any University Institution? If so give details

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Indicate the number of Crossed Postal/Money Order /Bank pay in slip you enclosed with this form being Application fees:

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19. Do you have any physical or communication disabilities? (Tick/whichever is applicable)

a) Vision/Mobility/speech/Hearing/Others

If any of the above give details of disability

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b) Duration of the disability

c) Type of supportive gear being used/required

d) Sponsor of (c) above

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N.B: This information is to prepare the University to receive you and it will not mitigate against your admission.

20. Financial Sponsor (for University fees) - Give full name and address

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21. Statement by applicant:

I have acquainted myself with the entrance qualifications to the Tumaini University and with the courses available and I certify that to the best of my knowledge, the information given is correct.

Date: .....Signature of applicant: .....