



TUMAINI UNIVERSITY

Dar es Salaam College

P.O. Box 77588, Dar es Salaam

Mwenge Campus

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FORM A

STUDENT'S REGISTRATION FORM FOR CERTIFICATE PROGRAMME 2017/2018
ACADEMIC YEAR

(To be completed by the students joining the College for the first time, write the name that appears to your certificates.)

PLEASE USE CAPITAL LETTERS

1. SURNAME :

FIRST NAME :

MIDDLE NAME :

(As indicated in your certificates)

2. DATE OF BIRTH :

PLACE OF BIRTH: NATIONALITY:

3. DISTRICT OF ORIGIN: HOME VILLAGE:

4. SEX: MARITAL STATUS:

5. PERMANENT HOME ADDRESS (POSTAL):

TELEPHONE :

6. COURSE ADMITTED INTO (IN FULL)

SESSION:MORNING /EVENING

7. RESIDENCE :

8. FINANCIAL SPONSOR:

9. EMPLOYER:

ADDRESS OF EMPLOYER:

TITLE OF YOUR POST: -----

RESPONSIBILITIES OF YOUR WORK: -----

WORK STATION: -----

10. NAME OF FATHER: -----

HIS OCCUPATION : -----

HIS ADDRESS: -----

TELEPHONE: -----

NAME OF MOTHER : -----

HER OCCUPATION : -----

HER ADDRESS : -----

TELEPHONE : -----

NAME OF BROTHER: -----

HIS OCCUPATION: -----

HIS ADDRESS: -----

TELEPHONE: -----

NAME OF SISTER: -----

HER OCCUPATION : -----

HER ADDRESS: -----

TELEPHONE : -----

NAME OF
HUSBAND/WIFE: -----

HIS/HER OCCUPATON: -----

HIS/HER ADDRESS: -----

TELEPHONE: -----

NAME OF ANY OTHER CLOSE RELATIVE: -----

HIS/HER OCCUPATION : -----

HIS/HER ADDRESS: -----

TELEPHONE: -----

11. SECONDARY SCHOOLS AND COLLEGES ATTENDED (GIVE DATES)

12. ORIGINAL CERTIFICATES PRESENTED (PLEASE TICK)

(A) NATIONAL FORM IV (O-LEVEL) OR EQUIVALENT: -----

(B) NATIONAL FORM VI (A-LEVEL) OR EQUIVALENT: -----

13. NATIONAL FORM IV OR EQUIVALENT EXAMINATION RESULTS

| S/NO. | SUBJECT TAKEN | GRADE/MARK (A,B,C, ETC) | DIVISION/ CLASS I,II,ETC | YEAR OF COMPLETION |
|-------|---------------|-------------------------|--------------------------|--------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| 9. | | | | |
| 10. | | | | |

EXAMINING AUTHORITY: -----

INDEX NO: ----- EXAMINATION CENTRE: -----

COUNTRY : -----

14. STATEMENT BY STUDENT:

I HEREBY CERTIFY THAT THE FOREGOING INFORMATION I HAVE GIVEN IS CORRECT TO THE BEST OF MY KNOWLEDGE

DATE: ----- SIGNATURE: -----