

TUMAINI UNIVERSITY
DAR ES SALAAM COLLEGE
 (CONSTITUENT COLLEGE OF TUMAINI UNIVERSITY MAKUMIRA)



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Passport Size
Photos

OFFICE OF THE DEPUTY PROVOST FOR ACADEMIC AFFAIRS

DIRECTORATE OF POSTGRADUATE STUDIES

**Application for admission to Master of Business Administration (MBA)
 programme for academic year 2017/2018**

I. SPECIALIZATIONS:

Which MBA specialization are you applying for? (Please Tick)

- [] MBA - Human Resources Management
 [] MBA - Banking and Finance
 [] MBA - Marketing and Entrepreneurship

II. PERSONAL INFORMATION

Surname		Mailing Address	
First Name		City	
Middle Name		Region	
Gender		Country	
Marital Status		Phone Number	
Date of Birth		Mobile Number	
Place of Birth		Fax Number	
Nationality		E-mail Address	

III. ACADEMIC QUALIFICATIONS (Start with the highest qualifications attained)

S/N	Institution	Award	Year of Graduation	GPA/GRADE

IV. PROFESSIONAL QUALIFICATIONS (Start with the highest qualifications attained)

S/N	Awarding Board	Award	Year of Graduation

V. EMPLOYMENT HISTORY (Start with the most recent employer)

What is the nature of your employment?

Self employed Employed Other(s), please specify

A. If employed

Name of Employer 1.	
Address of Employer	
Period of Employment	
Position	
Name of Employer 2.	
Address of Employer	
Period of Employment	
Position	
B. If self employed	
Name of the Business 1.	
Type of Business	
Address of Business	
Period of running the business	
Position	
Name of the Business 2.	
Type of Business	
Address of Business	
Period of running the business	
Position	

VI. FINANCIAL SUPPORT FOR STUDIES

How do you intend to finance your studies?

Self Employer Other(s), please specify

Name of Sponsor (if applicable)			
Mailing Address			
City/Region/Country			
Phone Number		Fax Number	
E-mail Address			

VII. EMERGENCY CONTACT (Provide two names and addresses)

1. Contact Name	2. Contact Name
Relationship	Relationship
Mailing Address	Mailing Address
Phone Numbers	Phone Numbers
Fax Number	Fax Number
E-mail Address	E-mail Address

VIII. PERSONAL REFERENCES

Please give names of two referees (at least one must be academic) from whom information can be sought on academic Integrity and Status of Responsibility/Position

1. Reference Name	2. Reference Name
Mailing Address	Mailing Address
Phone Number	Phone Number
Mobile Number	Mobile Number
Fax Number	Fax Number
E-mail Address	E-mail Address

IX. DISABILITY

Nature of disability (if applicable)

Special needs (if applicable)

X. DECLARATION

I declare that the information and documents provided are true and correct to the best of my knowledge.

Date.....

Signature of applicant

XI. NOTE:

1. Students should arrange for their own accommodation.
2. Please Attach:
 - *Certified copies of certificate and transcripts.*
 - *Original application fee payment slip.*
 - *Two passport size photos*
 - *Birth Certificate*

Application fee for 2017/2018 applicants = TShs. 30,000/= . This fee is payable at the bank. TUDARCo Bank Account No.01J1021002200 at CRDB, NBC Acc No. 011103030931 and Maendeleo Bank Acc. No .013828266011.

This form must be completed and sent to:

Deputy Provost for Academic Affairs,
Tumaini University Dar es Salaam College,
P. O. Box 77588,
Dar es Salaam, Tanzania.
E-mail: dpaa@tudarco.ac.tz
Website: www.tudarco.ac.tz

XII. FOR OFFICIAL USE ONLY

Remarks.....
.....

Title:..... Signature:.....

Date:.....