



KAM COLLEGE OF HEALTH SCIENCES

P.O. Box 65158, Mobile: 0734 839 357 or 0784 615 663

E-mail: musikatz@yahoo.com or kamcollegehealthtz@yahoo.com

WEBSITE: www.kamcollegeofhealthscience.ac.tz

*Attach three
passport size
photographs*

COLLEGE REG. NUMBER - REG/HAS/104

STUDENT JOINING INSTRUCTION FORM YEAR 2022/2023 (SEPTEMBER INTAKE)

This form can be typed or handwritten.

Section 1: APPLICANT DETAILS (MAELEZO YA MUOMBAJI)					<i>Please</i>	
First Name						
Second Name						
Surname						
Date of Birth		Nationality				
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Marital Status	Single <input type="checkbox"/> Married <input type="checkbox"/>	No. of Children		
Do you consider yourself to have a disability?		Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you have a criminal conviction		Yes <input type="checkbox"/> No <input type="checkbox"/>	

Permanent Home Address (Anuani Ya Kudumu)				Address for Correspondence (If different from Home Address)			
City		Country		City		Country	
Post Code				Post Code		Country	
Telephone				Telephone			
Email	<i>Please write your e-mail address clearly</i>						

Section 2: COURSE SELECTION (CHAGUA KOZI)

<u>PROGRAMMES (PROGRAMU/KOZI ZA AFYA)</u>	<u>QUALIFICATION (KUFUZU)</u>
Diploma in clinical medicine N.T.A – 6	Clinical Officer (CO)
Diploma in Medical Laboratory Technology NTA – 6	Laboratory Technician
Diploma in Nursing N.T.A – 6	Registered Nurse (RN)
Diploma in Pharmaceutical Sciences NTA – 6	Pharmaceutical Technician
Diploma in Clinical Dentistry NTA – 6	Dental Officer (DO)
Diploma in Environmental Health Sciences NTA – 6	Environmental Health Officer
Diploma in Health Records Management NTA – 6	Medical Record Officer
Diploma in Social Work NTA – 6	Social Worker

Form No.0130

Section 3: EDUCATION DETAILS / ENTRY QUALIFICATIONS (SIFA / VIGezo VYA KUJIUNGA)

FOR CLINICAL MEDICINE, NURSING, PHARMACEUTICAL SCIENCES, MEDICAL LABORATORY, CLINICAL DENTISTRY, ENVIRONMENTAL HEALTH SCIENCES, HEALTH RECORDS MANAGEMENT AND SOCIAL WORK PROGRAMS: (CERTIFICATE AND DIPLOMA LEVELS)

- **Clinical Medicine:** Holders of Certificate of Secondary Education (CSEE) with Four Passes “D” including science subjects Physics/Engineering sciences, Chemistry and Biology and any other subject except Religious subject.
- **Medical Laboratory:** Holders of Certificate of Secondary Education (CSEE) with Four “D” Passes including science subjects Physics/Engineering sciences, Chemistry and Biology and any other subject except Religious subject.
- **Nursing:** Holders of Certificate of Secondary Education (CSEE) with Four Passes “D” including science subjects Physics/Engineering sciences, Chemistry and Biology and any other subject except Religious subject.
- **Pharmaceutical Sciences:** Holders of Certificate of Secondary Education (CSEE) with four “D” PASSES including Chemistry & Biology and any other subject except Religious subject.
- **Clinical Dentistry:** Holders of Certificate of Secondary Education (CSEE) with Four Passes “D” including science subjects Physics/Engineering sciences, Chemistry and Biology and any other subject except Religious subject.
- **Environmental Health Sciences:** Holders of Certificate of Secondary Education (CSEE) with Four Passes “D” including science subjects Biology, Chemistry, Physics/Engineering sciences, and any other subject except Religious subject.
- **Health Records Management:** Holders of Certificate of Secondary Education (CSEE) with Four Passes “D” including science subjects Biology, Chemistry, Basic Mathematics, English Language except Religious subject.
- **Social Work:** Holders of Certificate of Secondary Education (CSEE) with Four Passes in non-religious subject.

Holder of Basic Technician Certificate (NTA Level 4) in Social Work, Social Protection or Advanced Certificate of Secondary Education (ACSSE) with at least one Principal pass and one Subsidiary in Principal subjects.

List all academic qualifications “O” “A” Level grade or equivalent transcripts attach

Qualification	From	To	School / College/ University name	Grade / % Mark

Section 4: APPLICATION PROCEDURES (JINSI YA KUJIUNGA)

An applicant is advised to follow these procedures:-

- A. Through online www.kamcollegeofhealthscience.ac.tz|Email: kamcollegehealthtz@yahoo.com**
- I. Necessary and required certificates (Scan and email us)
 - II. 30,000/= Tsh application fee. Payments are to be made at the bank, scan your bank slip and send through our email address.
 - III. 2 recent passport size (Still picture)
 - IV. Download your application form online through our website keep it till your reporting day.
- B. Direct contact or visit the college.**
- i. Visit KAM college located at Kimara Korogwe (BUS STATION)
 - ii. Bring your 30,000/= Tsh, 3 passport size and certificates
 - iii. After direct communication you will be given a joining form.

Section 5: EMPLOYMENT DETAILS (MAELEZO YA AJIRA): Important if you are applying as a mature age student.

Please give details of positions held over the past 5 years, if you are applying as a mature – age or for admission as a post graduate, provide detailed job descriptions on separate page and attach documentary evidence, e.g. reference letters from employers.

Employer name	Address	Position held	From	To

Section 6: REFEREES (WADHAMINI)

Please complete in BLOCK letters or type (Tafadhali jaza kwa herufi kubwa)

Please provide the names of two referees; at least one should be an academic referee who has knowledge of your academic ability.

Referee name	Address	Telephone	E-mail

Section 7: FINANCES (FEDHA)

Indicate how you intend to finance your studies and your living expenses in Dar es Salaam.

Who will finance your studies at KCHS?		Family	Employer	Loan	Savings	Other
Parents/Guardians						
Telephone No.			E-mail			

Sponsor Declaration: I have agreed to finance the above named applicant in his/her studies at KCHS and agreed to release funds for tuition fees and living expenses when required.

Signed: _____ Name _____ Date: _____

Section 8: FEES STRUCTURES & PAYMENT (MFUMO WA ADA NA MALIPO)

All payments shall be paid directly to:

- KAM MEDICARE PHARMACY Bank Account at CRDB (**Account No. 01J1005525700**) or
 - KAM DSM PHARMACY LTD Bank Account at CRDB (**Account No. 01J1008800000**)
- or
- KAM DSM PHARMACY LTD Bank Account at NMB (**Account No. 22510065139**)
- Bring bank slips to the college.
 - The Annual fees are payable in full or in two installments at the beginning of each academic year / semester.
 - **Application Form Fee is 30,000/= Tsh:** /= to be paid through the bank account above.

Clinical Medicine Course (CA & CO), Medical Laboratory Course (CMLT & DMLT), Nursing, Pharmaceutical Sciences, Direct Diploma Programmes, Clinical Dentistry (DA & DO), Environmental Health Sciences, Health Records Management and Social Work.

1: DIPLOMA - UPGRADING: (N.T.A LEVEL 6)

DESCRIPTION	DAY	HOSTEL
Annual Tuition fee	3,500,000.00	3,500,000.00
Accommodation per annual		500,000.00
Total cost to college (without meal)	3,500,000.00	4,000,000.00
Meal per annual		1,488,000.00
Total annual cost to college (with meal)		5,988,000.00

**2: CERTIFICATE & DIPLOMA - DIRECT ENTRY (N.T.A LEVEL 5 & 6)
(Clinical Medicine, Medical Laboratory, Pharmacy, Dental and Nursing)**

DESCRIPTION	DAY	HOSTEL
Annual Tuition fees	2,500,000.00	2,500,000.00
Accommodation per annual		500,000.00
Total cost to college (without meal)	2,500,000.00	3,000,000.00
Meal per annual		1,488,000.00
Total annual cost to college (with meal)		4,488,000.00

**3: CERTIFICATE & DIPLOMA - DIRECT ENTRY (N.T.A LEVEL 5 & 6)
(Environmental Health Sciences, Health Records Management & Social Work)**

DESCRIPTION	DAY	HOSTEL
Annual Tuition fees	2,500,000.00	2,500,000.00
Accommodation per annual		500,000.00
Total cost to college (without meal)	2,500,000.00	3,000,000.00
Meal per annual		1,488,000.00
Total annual cost to college (with meal)		4,488,000.00

4: Ministry of Health, Community Development, Gender, Elderly and Children Examination fee

Annual Examination fee: (Malipo ya Mtihani wa Wizara kila Mwaka)	150,000/=
---	------------------

Other payment pending on examination regulation may be needed / arises.

- National Examination Supplementary fees (Kurudia Mtihani 300,000/-)

Section 9: ACCOMODATION (MALAZI)YES NO (tick)

All residents are required to sign an accommodation agreement / contract before allocated to the room.

If **YES**:- During your stay bring:-

- i) 2 pair of bed sheet
- ii) 1 pair of pillow cases
- iii) 1 Towel & snickers
- iv) 1 Mosquito net
- v) 1 bucket
- vi) 2 Spoons, 2 Cups, Food plates / dishes & Small containers (bakuli)

Section 10: COLLEGE UNIFORMS (SARE ZA CHUO)

All uniforms are available at the college campus and should be paid by cash during registration.

MALES:

- i. Khaki trouser per 25,000/- Tsh (**For students of Clinical Medicine, Medical Lab, Clinical Dentistry, Pharmacy and Environmental Health Sciences programs**)
- i. White shirt per 15,000/- Tsh (**For students of Clinical Medicine, Medical Lab, Clinical Dentistry, Pharmacy, Environmental Health Sciences and Health Records Management programs**).
- ii. Dark Blue trouser per 25,000/= Tsh. (**Health Records Management only**)
- iii. Long sleeved Clinical coat per 25,000/- Tsh (**For students of Clinical Medicine, Medical Lab, Clinical Dentistry, Pharmacy, Environmental Health Sciences, Health Records Management and Social Work programs**)
- iv. Full trouser and Shirt 50,000/- Tsh **for Nursing (white full on suit)**

FEMALES:

- ii. Heavy white dress with Khaki label on shoulder for 25,000 tsh (**For students of Clinical Medicine, Medical Lab, Clinical Dentistry, Pharmacy and Environmental Health Sciences programs**).
- iii. Dark Blue skirt Tsh. 20,000/= and White shirt **15,000/= (Health Records Management Only)**
- iv. **Pink dress for 25,000/-Tsh (For Nursing students only)**
- v. Long sleeved Clinical coat per 25,000/- Tsh (**For students of Clinical Medicine, Medical Lab, Clinical Dentistry, Pharmacy, Environmental Health Sciences, Health Records Management and Social Work programs**)
- vi. **Full trouser and gown/Hijabu for 50,000 Tsh.**

NB: Jeans materials are not allowed in classes and during clinical/practical duties in hospitals.

Students should wear Black or dark brown shoes during class, practical/Clinical sessions hours.

Section 11: MEDICAL EQUIPMENTS / INSTRUMENTS:

- **For Clinical Medicine Course:**

Sphygmomanometer, Patella hummer, Stethoscope, Tape measure, Penlight.

- **Other Programs:**

Will be instructed during training sessions

Section 12: MEALS (CHAKULA)

The college has student's cafeteria

- All 3 meals (breakfast, lunch & dinner) will be served to **residents** and **non-residents** at affordable price (depending on the menu of the day).
- Each student is advised to bring enough pocket money for his/her daily meals during field / practical work (out of the college campus periods).

Section 13: MEDICAL STATUS / REPORTS (TAARIFA YA KIAFYA)

- Do you have long term injury, specific learning disability, chronic illness or mental health condition (tick) Yes
No

If yes please specify Mobility Vision Hearing Speech

Other please specify (infections, congenital diseases etc)

Supported by authorized physician (doctor) comments:- The applicant is / is NOT physically and mentally fit.

Dr's Name: _____

Dr's Signature: _____

Stamp: _____

Section 14: DOCUMENTS REQUIRED (NYARAKA ZINAZOHITAJIKA)

<p>1. This application form (mandatory)</p> <p>2. Latest academic transcripts/ certificates (mandatory) from highest qualification only</p> <ul style="list-style-type: none">- Bring unexpired, both original and legal certified copies.	<p>3. Three passport-size photo of student Attach to front of this application</p> <p>4. Bank Slips</p> <p>Please note: Students are required to bring their original documents on Registration Day.</p>
--	--

Section 15: TERMS AND CONDITIONS (VIGezo NA MASHARTI)

1. I am responsible for familiarizing myself with and abiding by all College student policies, as listed in the Admissions.
2. I agree to meet all assessment and exam requirements as stipulated by the College.
3. I agree to abide by the attendance rules of the College and ensure that my class attendance is minimum of 85% throughout the duration of the course. I understand that if classroom attendance is not maintained at the minimum level then, after three warnings, I can be excluded from further studies at the College and my parents/guardian, sponsor will be informed in writing.
4. No refunds will be given for any payment made, including sponsor overpaid school fees.
5. In agreeing to abide by this declaration I undertake to pay all fees as they become due and to meet any late fees and collection charges.
6. I agree to meet my financial obligations to the College in full and by the due date provided to me as detailed in my payment plan. I understand that I will not be permitted to enroll, sit for exams or graduate if I fail to do so.
7. I hereby state that the information I have provided to the College is true and factual and that no information which would have a material bearing on this application has been withheld. I understand that the College will take action if it considers appropriate if subsequently it is found that part or all of the information provided is false.

Student Declaration: (KIAPO CHA MWANAFUNZI)

I am applying for admission to KCHS. I understand that the decision to offer me a place rests with the college, and the decision of the College is final. If I am offered and accept a place on the programme, I agree to abide the rules and regulations of the College.

Signed: _____ Name: _____ Date: _____

Section 16: KCHS DECISION ON STUDENTS ADMISSION

For official use

The said applicant by the name above is registered and selected to join the programme of (Tick)

- | | | |
|------------------------------|-------------------------------|----------------------------|
| 1) Medical Laboratory | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 2) Clinical Medicine | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 3) Nursing | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 4) Pharmaceutical Sciences | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 5) Clinical Dentistry | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 6) Environmental Health Sc | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 7) Health Records Management | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |
| 8) Social Work | (i) Certificate (NTA LEVEL 5) | (ii) Diploma (NTA LEVEL 6) |

Commencing on:- Day of Year

Section 17: College Registration Number REG/HAS/104 (NAMBA YA USAJILI WA CHUO)

KAM College of Health Sciences (KCHS) Registered by both: - (Chuo kimesajiliwa na)

The National Council for Technical and Vocation Education and Training Education (NACTVET) and Ministry of Health (MoH).

For / Principal:

KAM COLLEGE OF HEALTH SCIENCES

(Official stamp)