



THE UNITED REPUBLIC OF TANZANIA  
 MINISTRY OF LANDS, HOUSING AND HUMAN SETTLEMENTS DEVELOPMENT



**ARDHI INSTITUTE TABORA**  
**P.O. BOX 744, TABORA**  
**TEL. 026-2604591, FAX. 026-2604928**  
**E-mail: arita@arita.ac.tz, registrar@arita.ac.tz**

FORM No.....

Photograph

**APPLICATION FORM FOR ORDINARY DIPLOMA**  
**(TECHNICIAN CERTIFICATE – NTA LEVEL 5): 2018/2019**

**A. INSTRUCTIONS:**

- (i) This form must be filled carefully in capital letters.
- (ii) Affix a coloured passport size photograph on the space provided.
- (iii) The cost of the application form is **Tshs. 10,000.00** which is non-refundable and should be deposited into account: **Principal Ardhi Institute, A/C No. 51001100026 NMB, Mihayo Branch, Tabora.**
- (iv) Duly completed form should be returned to:  
**Registrar, Ardhi Institute Tabora P.O. Box 744, Tabora.**
- (v) On returning this form, applicant **MUST** attach photocopies of all the relevant Certificates (such as ACSEE, CSEE, Technical Certificate, School Leaving Certificates and Birth Certificate).
- (vi) Submission of application form should be accompanied by a **Bank pay-in slip** after depositing the money into a Bank.
- (vii) **Consideration** will be made to all applicants who meet the **minimum entry requirement** for each Course.
- (viii) Application forms must reach the Institute before 8<sup>th</sup> Sept, 2018.

**B. APPLICANT'S PARTICULARS.**

- (i) NAME OF APPLICANT.....  
*(as used in the form four/form six national examinations)*
- (ii) DATE AND PLACE OF BIRTH.....
- (iii) GENDER:      Male       Female
- (iv) NATIONALITY.....
- (v) NAME OF O-LEVEL SEC. SCHOOL.....
- (vi) NAME OF TECHNICAL INSTITUTE.....
- (vii) NAME OF A-LEVEL SEC. SCHOOL.....

(vi) **National form IV (CSEE)/Technical Institute (Certificate)/form VI (ACSEE) results**

Your selection and admission into NTA Level 5 (Ordinary Diploma) will be determined by the National form IV (CSEE) and relevant Certificate from an institution recognized by the Government education regulatory bodies or National form VI (ACSEE) results. Please submit the photocopies of respective certificates with this application. If your certificate(s) has not been released by NECTA, valid results slips **will be accepted**.

Please select two (2) courses according to the order of preference and indicate in the column of preference. **Key: 1=First preference, 2=Second preference**

<b>Programs</b>	<b>Minimum requirements for applicants with form IV certificate</b>	<b>Fill in the certificate name e.g. Cartography, Land Management, Law, Land records etc.</b>	<b>Minimum requirements for applicants with form VI certificate</b>	<b>Preference</b>
Graphic Arts and Printing	Possession of Tech Cert. <b>Or</b> a Basic Technician Certificate (NTA Level 4) <b>OR</b> Holder of NVA Level 3 Certificate (VETA graduates)		One Principal pass in either Physics, Chemistry, Maths, Geography, Agriculture, Biology or Economics and at least one Subsidiary pass	
Cartography	Possession of Tech Cert. <b>Or</b> a Basic Technician Certificate (NTA Level 4) <b>OR</b> Holder of NVA Level 3 Certificate (VETA graduates)		One Principal pass in either Maths, Geography, Physics, Agriculture, Biology, Economics or Chemistry and at least one Subsidiary pass	
Land Management, Valuation and Registration	Possession of Tech Cert. <b>Or</b> a Basic Technician Certificate (NTA Level 4) <b>OR</b> Teachers grade IIIA		One Principal pass and at least one Subsidiary pass in any subject.	

C. **PARENT'S/GUARDIAN'S PARTICULARS.**

- (i) NAME OF PARENT/GUARDIAN.....
- (ii) PERMANENT CONTACT ADDRESS.....
- (iii) OCCUPATION:.....
- (iv) MOBILE TEL. NO. ....

D. **EMPLOYER'S PARTICULARS** (If applicable)

- (i) NAME OF EMPLOYER.....
- (ii) DESIGNATION (JOB TITLE):.....
- (iii) CONTACT ADDRESS.....
- (iv) OFFICE TELEPHONE NO. ....
- (v) OFFICE E-mail ADDRESS:.....

E. **DECLARATION BY PARENT/GUARDIAN/EMPLOYER.**

I .....(name) declare that:

- (i) If selected, .....(name of applicant) will abide by the Institute's rules and regulations.
- (ii) I will pay all the fees and other Institute charges in time and give him/her all facilities required by the Institute.

Signature..... Date.....

Official Stamp (If applicable)

F. **COMMITMENT BY APPLICANT**

I.....(name) if admitted, will adhere to the Institute's laid down rules and regulations.

Signature..... Date.....

G. **(FOR OFFICIAL USE ONLY)**  
***DO NOT WRITE ANYTHING IN THIS PART***

**1. Recommendations by the Registrar:**

Received and accepted/not accepted for consideration

Name and Signature.....Date.....

**2. Decision of the Institute Admission Committee**

Approved/not approved for Admission to the Course in

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Name and signature of Chairman

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Name and signature of Secretary

Date.....

Official Stamp