

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



FC	ORM No				
		Photograph			
	PLICATION FORM FOR ORDINARY DIPLOMA				
<u>(T)</u>	ECHNICIAN CERTIFICATE - NTA LEVEL 5): 2021/2022				
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-refundab	le and should be			
	deposited using Control Number 996740005347 NMB Bank - Principal Ardhi Ins				
	Tabora.				
iv.	Duly completed form should be returned to:				
	Registrar, Ardhi Institute Tabora P.O. Box 744, Tabora OR through				
	Email: arita@arita.ac.tz On returning this form, applicant MUST attach photocopies of all the				
v.					
	Certificates (such as ACSEE, CSEE, Technical Certificate, School	Leaving			
	Certificates and Birth Certificate).	1. 0			
vi.	Submission of application form should be accompanied by a Bank pay-in	slip after			
vii.	depositing the money into a Bank through the provided control number. Consideration will be made to all applicants who meet the minimu	m enter			
V11.	requirement for each Course.	in entry			
viii.	Application forms must reach the Institute on or before 13th August 2021				
V 1111.	rippineation forms must reach the motitate on or selecte to magast 2021				
B. APPLICANT'S PARTICULARS.					
	(i) NAME OF APPLICANT	•••••			
(as used in the form four/form six national examinations)					
1	(ii) MOBILE PHONE NOE-mail address				
	(iii) DATE OF BIRTH				
	(iv) GENDER: Male Female				
	(v) NATIONALITY	•••••			
	(vi) NAME OF O-LEVEL SEC. SCHOOL	••••			
	(vii) NAME OF TECHNICAL INSTITUTE	• • • • • • • • • • • • • • • • • • • •			

(viii) NAME OF A-LEVEL SEC. SCHOOL.....

(ix) 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 certified 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**

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

C. PARENT'S/GUARDIAN'S PARTICULARS. NAME OF PARENT/GUARDIAN..... PERMANENT CONTACT ADDRESS..... (iii) OCCUPATION:..... MOBILE TEL. NO. E-mail address.... D. **EMPLOYER'S PARTICULARS** (If applicable) NAME OF EMPLOYER..... (i) DESIGNATION (JOB TITLE): (ii) CONTACT ADDRESS..... (iii) OFFICE TELEPHONE NO. (iv) OFFICE E-mail ADDRESS: (v) Page 2

E.	DECLARATION BY PARENT/GUARDIAN/EMPLOYER.		
	I (i)	If selected,	
	(ii)	I will pay all the fees and other Institute charges in time and give him/her all facilities required by the Institute.	
	Sign	ature Date	
	Offic	ial Stamp (If applicable)	
F.	COM	MITMENT BY APPLICANT	
		(name) if admitted, will adhere e Institute's laid down rules and regulations.	
	Sign	ature Date	
G.		OFFICIAL USE ONLY) OT WRITE ANYTHING IN THIS PART	
1. R	ecomi	nendations by the Registrar:	
Rece	ived a	nd accepted/not accepted for consideration	
Nam	e and	SignatureDate	
2. D	ecisio	n of the Institute Admission Committee	
Appr	oved/	not approved for Admission to the Course in	
Nam		signature of Chairman Name and signature of Secretary	
		Date	
		Official Stamp	