

We warmly welcome you at our esteemed college once again!!

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For PRINCIPAL



# WESTERN TANGANYIKA COLLEGE

P. O Box 74, KIGOMA, TANZANIA, Roman Catholic Cathedral Building, Kibirizi Road

Tel: +255 28 2803345/ +255 28 2804956, Cel: +255 713 686812, +255713398988

Email: [western.tanganyika@yahoo.com](mailto:western.tanganyika@yahoo.com) Website: [www.wetaco.orgfree.com](http://www.wetaco.orgfree.com)

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NACTE REG/BMG/032

NBAA/TPRS/051

Form No: .....

**HEALTH AND ALLIED SCIENCES DEPARTMENT**  
**PHARMACEUTICAL SCIENCES**

APPLICATION FORM – 10,000/=

*(Please fill information in BLOCK LETTERS ONLY)*

1.0 PERSONAL PARTICULARS.

Name: First.....Middle.....Surname.....

(Note: The names entered in this form must be exactly the same as those appeared  
On your four IV or VI certificate to be used for admission.)

Full Address.....Mobile No.....

E-mail: .....Area of residence.....

District.....Region.....

Marital status.....Date of birth.....

Place of domicile .....Gender.....

Citizenship.....

2.0 EDUCATIONAL INFORMATION (Tick as appropriate)

O' LEVEL	A' LEVEL	LEVEL 3 VETA	NTA LEVEL 4	NTA LEVEL 5	NTA LEVEL 6

Work experience (Years).....

3.0 EDUCATION BACKGROUND

Name of School	Year completed	School location	Grades of subjects (e.g. A,B,C,D)			
			Biology	Chemistry	Physics	General study
(A-Level if applicable) ..... ..... .....						
(O-Level ) ..... ..... .....			Physics	Biology	Chemistry	English

4.0 SPONSORSHIP

(Tick as appropriate)

Government	Private company	self	Loans board	Other (specify)

4.1 Preferred mode of training (Tick as appropriate)

Full Time	Hostel

5.0 NTA LEVELS OFFERED AT PHARMACEUTICAL SCIENCES

Basic Technician Certificate in Pharmaceutical Sciences	1,300,000
Technician Certificate in Pharmaceutical Sciences	1,300,000
Ordinary Diploma in Pharmaceutical Sciences	1,300,000

**FEE INSTALMENTS**

- 1. -----
- 2. -----
- 3. -----

**5.1 ADDITIONAL PROGRAMS OFFERED**

Sn	LIST OF COURSES	FEES
1	Computer Knowledge	FREE
2	English	FREE

NB: Tuition fees may be paid in full or in three installments per academic year.

Name of the course selected .....

**ENTRY QUALIFICATIONS AND COURSE DURATION.**

- Basic Technician Certificate in Pharmaceutical Sciences (NTA Level 4), Entry qualification , Holder of Certificate of secondary education examination (CSEE) with four passes in non-religious subjects including ‘D’ passes in Chemistry and Biology.
- Technician Certificate in Pharmaceutical Sciences (NTA Level 5), Entry Qualification, holder of Certificate of secondary education examination (CSEE) with four passes in non-religious subjects including ‘D’ passes in Chemistry and Biology; AND Possession of Basic Technician Certificate (NTA Level 4) in Pharmaceutical Sciences.

**7.0 APPLICANT’S DECLARATION.**

I certify that the particulars furnished in this application form are true and complete in all respects and that no relevant information has been withheld.

I understand that misrepresentation, falsification and or withholding information in regards to this application are serious offences that may result in nullification /denial of registration and or prosecution.

Applicant’s name in full.....

Applicant’s signature.....Date.....

**8.0 SPONSOR’S CONFIRMATION**

This Organization/ Person will meet nominee’s tuition fees and other expenses as detailed in Western Tanganyika College application form and joining instruction given.

Name of Sponsoring Organization/Parent/Guardian.....

Occupation.....

Full Address.....Telephone.....

Sponsor Signature .....Date.....

Name of Sponsoring Organization/Parent/Guardian.....

Occupation.....

Full Address.....Telephone.....

Sponsor Signature .....Date.....