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SENGEREMA CLINICAL OFFICERS' TRAINING CENTRE
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APPLICATION FORM FOR ADMISSION INTO CERTIFICATE AND DIPLOMA IN MEDICAL PROGRAMMES FOR SEPTEMBER 2018 INTAKE, 2018/2019 ACADEMIC YEAR.

PART I: APPLICANT'S PARTICULARS:

1. NAME OF APPLICANT: (as it appears in form IV certificate): -----
2. ADDRESS OF APPLICANT: -----
3. DISTRICT:-----
4. REGION:-----
5. APPLICANT'S PHONE NUMBER: -----
6. DATE OF BIRTH/AGE: ----- SEX: -----
7. NATIONALITY: -----
8. YEAR OF COMPLETING FORM IV: ----- NAME OF SCHOOL: -----
9. YEAR OF COMPLETING FORM VI: -----NAME OF SCHOOL: -----
10. EMAIL ADDRESS:-----
11. NAME OF PRIMARY SCHOOL YOU COMPLETED STANDARD SEVEN:-----
12. FORM IV INDEX NO: -----
13. NAME OF PARENT/GUARDIAN:-----
14. PARENT'S/GUARDIAN'S PHONE NUMBER:-----

PART II: PROGRAMMES OFFERED, DURATION AND MINIMUM ENTRANCE QUALIFICATION BY SENGHEREMA CLINICAL OFFICERS' AND MEDICAL LABORATORY SCIENCES DEPARTMENTS.

S/N	PROGRAMME	DURATION	MINIMUM ENTRANCE QUALIFYING (O – LEVEL)
1	CERTIFICATE IN MEDICAL LABORATORY SCIENCES	2 YEARS	Physics/Engineering Sciences D, Chemistry D, Biology D, English D, and Mathematics D
2	CERTIFICATE IN CLINICAL MEDICINE	2 YEARS	Physics/Engineering Sciences D, Chemistry D, Biology D, English D, and Mathematics D
3	DIPLOMA IN CLINICAL MEDICINE	3 YEARS	Physics/Engineering Sciences D, Chemistry C, Biology C, English D, and Mathematics D

PART III: RESULTS/ GRADES OF NATIONAL FORM IV EXAMINATION IN THE SUBJECTS BELOW:

PHYSICS/ENGINEERING SCIENCES: ----- CHEMISTRY: ----- BIOLOGY: ----- ENGLISH: -----
 MATHEMATICS: -----

DIVISION: ----- POINTS: -----

PART IV: APPLICATION FOR A COURSE OF:

(Tick against the name of the course you want to apply)

You can choose more than one course.

- I. CERTIFICATE IN MEDICAL LABORATORY SCIENCES
- II. CERTIFICATE IN CLINICAL MEDICINE
- III. DIPLOMA IN CLINICAL MEDICINE

