INSTRUCTIONS:
1. Please fill out the application form clearly and completely (in English and preferably type written).
2. Completely filled application form must be sent to the Principal together with:
   i. Sealed certified copies of academic certificates and transcripts written in English or their English translation.
   ii. All equivalence letters from NECTA/NACTE for foreigners.
   iii. Release Letter from employer for employed applicants.
   iv. Certified copy of Birth Certificate
3. Where financial support is from a donor, a written confirmation of sponsorship is required.
4. Applicants will be required to pay a non-refundable application fee of Tsh. 10,000/= (Ten thousand) for Tanzanian and USD 10.00 for foreigners.
5. Candidates should return their application forms along with the original bank Pay – in Slip (bearing the name of the applicant) promptly not later than 10th September 2020.
6. Applicants should be proficient in written and spoken English.
7. Fee Structure (Costs do not cover charges for breakfast, lunch, accommodation, students’ field attachment and field working gears). Successful applicants will be required to pay the following training fees:
   i. First Year: Technician Certificate Course and Ordinary Diploma Course Tsh. 816,000/= or USD $1,380.00 for Non-Tanzanian Applicants.
   ii. Second Year: Technician Certificate Course and Ordinary Diploma Course Tsh. 786,000/= or USD $1,250.00 for Non-Tanzanian Applicants.

Note:
   a. Training fee can be paid fully or on installment basis i.e. half of the total fee at the beginning of semester I, another half at the beginning of semester II.
   b. Limited accommodation is available at the campus which costs Tsh. 270,000/= per year for local residents (payable once or in two installments).
   c. Fees for foreign students are hostel inclusive.

8. Bank Details:
   All payment should be done through the following:
   
   Account Name: The Principal, Beekeeping Training Institute-Tabora
   
   Bank Name: National Microfinance Bank (NMB)
   
   Account Number: 51001100012

9. All inquiries, duly filled forms and all supporting documents for admission should be sent to:

   The Principal, Beekeeping Training Institute, Tabora
   
P.O. Box 62,
   
   TABORA, TANZANIA
   
   E-mail: info@bti.ac.tz
PART A: PERSONAL PARTICULARS

1. SURNAME .................................................................
2. FIRST NAME .............................................................
3. MIDDLE NAME ............................................................

NOTE: The name in which you will be registered shall correspond exactly with the names in your Academic Certificate(s) or equivalent document(s).

4. Date of Birth: (DD / MM / YY) ........................................
5. Place of Birth: (Town or District and Country) .........................

6. Country of Residence: ..................................................
7. Citizenship [TICK WHICH IS APPLICABLE]

8. Sex: Male [ ] Female [ ]

9. Religion: .................................................................

10. Marital Status: Married [ ] Single [ ]

11. Contacts: Postal Address
    Mobile No .............................................................
    Tel: No ...............................................................
    E-mail ...............................................................
PART C: ACADEMIC QUALIFICATIONS

Provide detailed information of your academic qualifications attained beginning with the most recent.

<table>
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<tr>
<th>Year of completion</th>
<th>Institution/ School attended</th>
<th>Qualification Attained (CSEE, ACSE and Others)</th>
<th>Registration number</th>
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PART D: SPONSORSHIP DECLARATION (To be filled by the sponsor)

I…………………………………………………………………………………. * (Name of Parent/Guardian/ Donor or others)
Hereby declare that, I undertake to bear the Financial Support of the training for the named candidate in PART A.

I undertake to bear ALL costs and expenses involved.

Name of the Parent/Guardian/ Sponsor*: .................................................................

Physical Address of the Parent/Guardian/ Sponsor*: ............................................................

Phone number of the Parent/Guardian/ Sponsor*: .................................................................

Relationship with the Applicant: ..........................................................................................

(*Delete where not applicable)

Signature: ..................................

Official Stamp: .............................. (If applicable) Date: .......................  

PART E: APPLICANT'S DECLARATION

I …………………………………………………………….. (Name of Applicant as shown in academic certificates) certify that the above information given is correct to the best of my knowledge.

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