

BEEKEEPING TRAINING INSTITUTE - TABORA APPLICATION FOR ADMISSION, ACADEMIC YEAR 2025/2026



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. 15,000/= 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)
- 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. 915000/=
 or USD\$ 1,380.00 for Non Tanzanian Applicants.
 - ii. Second Year: **Technician Certificate Course and Ordinary Diploma Course** Tsh. 1,025,000/= **or** USD\$ **1,300.00** for Non Tanzanian Applicants.
 - iii. Ordinary diploma (Upgrading course): Tsh 1,125,000/= USD\$ 1380.00

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. 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.
- d. Higher Education Student loans Board Sponsorship available through Application .

8. Bank Details:

All payment should be done through **Control number** (*Developed through Government Electronic Payment Gateway*) which is provided upon request by client through the following contact:

Accounting office: +255 655 847 847 or +255 713 147 758, Registrar of students (RoS): +255 626 166 440

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

OR through E-mail: admission@bti.ac.tz

(Parts A, B, C and D to be filled legibly by the Applicant. Please use BLOCK LETTERS throughout)

PART A: PERSONAL PARTICULARS (SHOULD BE TRUE AND VALID INFORMATION)

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:		[TICK WHICH IS APPLICABLE]		
		10. Marital Status: Married [] Single []		
11. Contacts: Postal Address		Mobile No. (Currently in use) Tel: No E-mail		
PART B: COURSE PROGRAMME FOR WHICH ADMISSION IS BEING SOUGHT				
Tick where appropriate:				
1. Training programme:				
i. Technician Certific	ate in Beekeeping			
ii. Ordinary Diploma i	n Beekeeping			
iii. Ordinary Diploma i	n Beekeeping (Upgradii	ng)		

Note: Applicants in need of BTI hostel services are required to communicate directly to the Institute via phone number: +255 626 166 440 or info@bti.ac.tz for more information. Online application should follow instructions provided in our website through www.btionlineapplication.ac.tz

PART C: ACADEMIC QUALIFICATIONS

Signature

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

Year of completion	Institution/ School attended	Qualification Attained (CSEE, ACSE and Others)	Index/ Registration number	
PART D: SPONSORHIP 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				

Date