



# STEFANO MOSHI MEMORIAL UNIVERSITY COLLEGE

A Constituent college of Tumaini University Makumira

P. O BOX 881, MOSHI

Passport  
size photo

## APPLICATION FOR ADMISSION TO DEGREE, DIPLOMA AND CERTIFICATE PROGRAMMES FOR ACADEMIC YEAR 2017/2018 (OCTOBER INTAKE)

*Please Write in Block Letters*

I. PERSONAL INFORMATION			
Surname		Mailing Address	
First Name		City	
Middle Name		Region	
Gender		Country	
Marital Status		Phone Number	
Date of Birth		Mobile Number	
Place of Birth		Fax Number	
Nationality		E-mail Address	

II. EDUCATION INFORMATION			
Name of "O" Level School		Name of "A" Level School	
Mailing Address		Mailing Address	
City		City	
Region		Region	

III OTHER RELEVANT PROGRAMMES/ COURSES ATTENDED			
Type of Course		Type of Course	
Name of School/ College		Name of School/ College	
Mailing Address		Mailing Address	
City		City	
Region		Region	

<b>IV. RELIGIOUS INFORMATION</b>			
Religious affiliation		Church/Mosque Name	
Denomination		Name of Pastor/Imam	

<b>V. FINANCIAL SUPPORT FOR STUDIES</b>			
Name of Sponsor			
Mailing Address			
City, Region, Country			
Phone Number		Fax Number	
E-mail Address			

<b>VI. FAMILY INFORMATION</b>			
Name of Father		Mailing Address	
Occupation		Employer	
Educational Level		Ethnic Identity	
Name of Mother		Mailing Address	
Occupation		Employer	
Educational Level		Ethnic Identity	
Name of Spouse		Mailing Address	
Occupation		Employer	
Educational Level		Ethnic Identity	

<b>VII. EMERGENCY CONTACT (Provide two names and addresses)</b>			
1.Contact Name		2. Contact Name	
Relation		Relation	
Mailing Address		Mailing Address	
Phone Number		Phone Number	
Mobile Number		Mobile Number	
Fax Number		Fax Number	

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## VIII. PERSONAL REFERENCES

Please give names of two referees from whom we can consult on :

- Academic Integrity.
- Status / Responsibility/Position.

1. Reference name and address:

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## IX. ACADEMIC PROGRAMMES

### PROGRAMMES OFFERED

Indicate your preference using number 1, 2, 3 against the column.

1	<b><i>Faculty of education</i></b>	
	Bachelor of Arts with Education	
	Bachelor of Business Administration with Education	
2	<b><i>Faculty of Theology</i></b>	
	Diploma in Theology	
	Diploma in Music	
	<b><i>Faculty of Business and Management Studies</i></b>	
	Bachelor of Arts in Community Development	
	Bachelor of Arts in Mass Communication	
	Bachelor of Arts in Public Administration and Management	
	Bachelor of Accountancy and Finance	
	Diploma in Office Management and Secretarial Studies	
	Diploma in Accountancy	
	Diploma in Business Administration and Management	
	Diploma in Community Development	
	Diploma in Mass Communication	
	Diploma in Law	
	Diploma in Office Management and Secretarial studies	
	Diploma in Human Resources Management	
	Diploma in Procurement and Materials Management	
	Certificate in Human Resources Management	
	Certificate in Journalism	
	Certificate in Law	

	Certificate in Community Development and Social work	
	Certificate in Procurement and Materials Management	
	Certificate in Accountancy and Finance	
3	<b><i>Faculty of Science and Technology</i></b>	
	Bachelor of Science in Information Technology	
	Bachelor of Science in Hospitality and Tourism Management	
	Diploma in Information Technology	
	Diploma in Hospitality and Tourism Studies	
	Certificate in Tour Guiding and Tourism Studies	
	Certificate in Information Technology	

**HOW DID YOU GET TO KNOW ABOUT SMMUCO?**

- 1) From a Television Advertisement
- 2) From a newspaper Advertisement
- 3) From Seminar
- 4) From SMMUCo
- 5) From a Friend/Relative
- 6) From Face book
- 7) Workshops
- 8) Church
- 9) From Instagram
- 10) From WhatsApp groups
- 11) Mosque
- 12) Fliers
- 13) Brochures
- 14) Other mention .....

**X. DECLARATION**

I declare that the information and documents provided are true and correct to the best of my knowledge.

Date.....

Signature of applicant.....

**XI. FOR OFFICIAL USE ONLY**

Remarks.....  
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Title.....

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

This form must be completed and sent to Stefano Moshi Memorial University College by 13<sup>th</sup> August, 2017 accompanied with a Bank pay slip of non refundable fee of TShs. 30,000.00 payable to:

Account Name : Stefano Moshi Memorial University College.  
Bank Name : CRDB  
Account Number : 01J 1040 880 500

**NOTE:**

**1. Please Attach:**

- ♣ Certified copies of “O” level, “A” level and other programmes / courses certificates and transcripts.
- ♣ Birth Certificate
- ♣ Duly completed medical examination form.
- ♣ A copy of application fee payment slip or receipt.

**2. For information on admissions contact:**

Deputy Provost for Academic Affairs,  
Stefano Moshi Memorial University College,  
P.O Box 881,  
**Moshi, Kilimanjaro**

Fax: (027) 2757880  
Tell: (027) 2757070  
Mobile: 0684390934  
Email: elctnmti@yahoo.com  
Website: www.smmuco.ac.tz