

THE UNITED REPUBLIC OF TANZANIA

THE EDUCATION ACT

(NO.25 of 1978)

Section 2(1) 60 (q)

APPLICATION FOR LICENCE AND REGISTRATION OF SEMINARY SCHOOL

To: The Minister of Education, Science and Technology,
Ministry of Education, Science and Technology,
DAR ES SALAAM.

u.f.s. The Zonal Chief Quality Assurer of Schools.

SECTION A: To be completed by the Manager (where the Manager is a body of persons by the authorized officer of the Organisation).

- 1. (a) Name of owner:
- 2. (a) Name of Manager:
- (b) Address of Manager:
- (c) Name of Organisation:
- (d) Name and Designation of authorized officer:
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- 3. (a) Proposed name of the school
- (b) School/Bias:
- (c) Date of its establishment:

4. LOCATION OF SCHOOL:

Religion: District/Municipality:

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Division: Plot No./Village (whichever applicable)

Ward:

5. DESCRIPTION OF BUILDINGS:

(a) Existing buildings (a copy of the building plans should be attached)

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6. FINANCE:

(a) Proposed annual fees: Tuition:.....Biology.....

Others

Maximum number of pupils to be accommodated

(b) Other sources of finance:

(c) School materials required to be provided by students (if applicable)

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7. ACADEMIC PARTICULARS:

(a) Maximum number of streams: Maximum number of students Highest class

(b) Source of recruitment of students:

(c) (i) Subjects and courses of instructions to be offered

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(ii) Types of final examinations to be conducted:

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(iii) Types of awards proposed to be granted upon successful completion of the course of instruction

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8. STAFF POSITION:

(a) Total number of teachers required:

(b) Total number of teachers available:

(c) Proposed ratio of teachers to students:

(d) Particulars of teachers available:

The list of teachers showing name, nationality, educational and professional qualifications, subjects qualified to teach, months of teaching experience and salary per month should accompany this application.

(e) Source of teaching staff:

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(f) The proposed permanent/contract/temporary terms and conditions of service of teachers are to be attached.

(g) Any other particulars regarding staff of the school:

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9. Name and address of proposed auditors of the school:

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10. (a) Signature of Applicant:

(b) Name of Applicant:

(c) Designation of Applicant:

Date: Place:

Note: Upon completion, this application should be submitted in duplicate to the Zonal Quality Assurer of Schools.

SECTION B: To be completed by the Zonal Chief Quality Assurer of Schools and then the original submitted to the Chief Education Officer

11. I certify that following an inspection of the school:

a) The buildings are suitable/not suitable for the purpose of a religious school

b) The equipment is adequate/not adequate

c) The teaching staff is adequate/not adequate.

Further remarks if any:

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12. I recommend that registration and licencing of the school be approved/delayed/rejected

13. Name of Zonal Quality Assurer:

Signature: Date:

Official Stamp:

FOR THE MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY

14. Commissioner for Education's decision:

a) Registration accepted/not accepted

b) Name of School approved/not approved

c) Remarks (if any) :

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Date:

Signature:

15. Minister's decision Approved/Not approved.

Date:

Signature:

MINISTER FOR EDUCATION, SCIENCE AND TECHNOLOGY

REGISTRATION NO: