



UNITED REPUBLIC OF TANZANIA
MINISTRY OF NATURAL RESOURCES AND TOURISM
Forestry & Beekeeping division



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Forestry and Wood Industries Training Centre,
P.O.BOX 516,
Mafinga - Iringa.

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APPLICATION FORM FOR ADMISSION 2024/2025 ACADEMIC YEAR

For Official Use Only:

APPLICATION FORM NO.....Received on.....Stamp.....

NOTE:

1. The applicant must affix a photograph in the space provided. An application form without a photograph will not be considered.
2. This application must be accompanied by photocopies of certificates, academic transcripts, and birth certificate.
3. Completed application must be accompanied by non-refundable TZS 10,000/= (Ten thousand) through account number **60210059379 - Forestry and Wood Industries Training Center (NMB)** as application fee
4. Candidates should return their application forms along with the original bank pay-in Slip (bearing the name of the applicant) promptly to reach the Center not later than **30th June, 2024**. The application form must be accompanied by a medical examination form filled by a government medical officer.
4. All inquiries and duly filled application forms should be addressed to: -
Principal,
Forestry and Wood Industries Training Centre (FWITC) - Mafinga,
P.O. Box 516,
MAFINGA - TANZANIA.
Tel. No. +255 763 320 102, E-mail: info@fwitic.ac.tz, Website: <http://www.fwitic.ac.tz>

(Parts A to C be filled legibly by the Applicant and please use BLOCK LETTERS throughout)

PART A: APPLICANT'S PERSONAL PARTICULARS

1. First Name.....Middle name.....Last name.....
Sex (M/F).....
2. Date of Birth (Attach copy of birth certificate)..... Place.....
Country..... Nationality.....
3. Permanent contact address.....
- Tel. Number (Home)..... Office..... Mobile.....
- E-mail.....National Identification Number

NOTE: Applicant E-mail,NIDA and contact is compulsory.

PART B: EDUCATION BACKGROUND

Provide details of your academic qualification giving dates beginning with the latest. (Attach copies of certificate awarded). ***Details of primary education is compulsory.**

YEAR	SCHOOL /INSTITUTE NAME	LEVEL
.....
.....
.....
.....
.....

PART C: Course programme for which admission is being sought: (Tick the appropriate)

- a. Certificate in Forestry attendants – National Vocation Award (NVA) level I - III
- b. Certificate in Wood Processing attendants – National Vocation Award (NVA) level I - III

PART D: ADMISSION REQUIREMENT

a. Certificate in Forestry attendants Course

The applicant must have Form IV Certificate with at least two passes.

OR

Certificate in Secondary Education from other countries with two passes and translated by NECTA.

b. Certificate in Wood Processing attendants Course

The applicant must have IV certificate with at least one pass of either Biology or Chemistry subject.

PART E: SPONSOR'S /GUARDIAN/PARENT CONTACTS

Name of the sponsor/guardian/parent.....

Permanent contact address..... Place.....

Relationship..... Office.....

Email:

PART F: FEE STRUCTURE YEAR 1

Year	Tuition fee	1 st Installment	2 nd Installment	3 rd Installment	4 th Installment
1	940,000/=	235,000/=	235,000/=	235,000/=	235,000/=

Other requirements

S/N	ITEM	COST
1	NHIF Insurance	50,400/=
2	PPE (Safety leather boots, rain boots, Dark green overall, helmet, leather gloves, safety glasses, ear protector and mask)	N/A
3	Uniforms (Green Army overall)	N/A
4	Scientific calculator	N/A

The training fee can be paid on an instalment basis, i.e. half of the total fee at the beginning of each Mid - semester. Training fee does not include accommodation.

- a. There is no government sponsorship
- b. For candidates with NVA level I - III certificates in Forestry attendants and Wood Processing attendants will study for two years.
- c. The cost does not cover charges for dinner, accommodation and student's field attachment

PART G: ACCOMODATION

Selected students will have to accommodate them self with their own cost.

PART H: DECLARATION

I..... (Name of the applicant) certify that the above information given is correct to the best of my knowledge.

.....

...../...../.....

(Signature of applicant)

(Date)

** Delete whichever is not applicable.*

MEDICAL EXAMINATION FORM

(To be filled by The Government Medical Officer)

PART A: HEALTH EXAMINATION

TO THE MEDICAL OFFICER

Please examine Mr/Mrs/Ms..... (Applicant's Name) as to his/her fitness to

Undertake..... (Name of the Course) at Forestry and Wood Industries Training Centre (FWITC) – Mafinga

PART B: MEDICAL CERTIFICATE

(To be completed by a Medical Officer)

I..... (Name of the Medical Officer) have examined the above and consider that the applicant:

- a. Has no infectious diseases (e.g. Tuberculosis or Tacoma or any other illness which could present risks to persons that will come in contact with
- b. Is in good health condition which allows him/her to undertake training
- c. Has full mental capacity
- d. Is physically fit to take practical training

Date...../...../20.....

Signature.....

Hospital.....

Designation.....

Official Stamp