

PHOTO  
(PICHA)



**THE SISTERS OF OUR LADY OF KILIMANJARO**  
**ST. THERESA SCHOOL OF NURSING**  
Soweto Street, Moshi, P.O Box 256, Moshi,  
Kilimanjaro.  
Email: [info@stson.ac.tz](mailto:info@stson.ac.tz), Tel: +255767446891  
[www.stson.ac.tz](http://www.stson.ac.tz)



Date .....

**APPLICATION FORM**

**REF:**

**APPLICATION TO THE ORDINARY DIPLOMA IN NURSING FOR 2021/2022**  
**ACADEMIC YEAR**

Personal Details	Surname	Middle Name	First Name
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Gender	Date of Birth	Place of Birth
	Male <input type="checkbox"/>	<input type="text"/>	<input type="text"/>
	Female <input type="checkbox"/>	Nationality	
	Name of Primary School Attended	<input type="text"/>	
	Name of Secondary School Attended (O Level)	Year Completed	<input type="text"/>
		<input type="text"/>	
		Index NO:	<input type="text"/>
		Year Completed	<input type="text"/>

Indicate Grades scored for each Subject (O Level)

**Name of Secondary School Attended (A Level)**

**Indicate Grades scored for each Subject (A Level)**

**Form IV**

Biology  Chemistry

Physics  Maths

English  Kiswahili

Geography  Civics

History

Index NO:

Year Completed

Biology  Chemistry

Physics  Maths

English  Kiswahili

Geography  History

	<p><b>Applicant's Contacts</b></p> <p><b>Parent/Guardian Contacts</b></p>	<p>Name.....</p> <p>Region.....District.....</p> <p>Address.....</p> <p>Phone/Mobile No.....</p> <p>Email Address.....</p> <p>Name.....</p> <p>Region.....District.....</p> <p>Address.....</p> <p>Phone/Mobile No.....</p> <p>Email Address .....</p> <p>Relationship.....</p>
	<p><b>Next of kin</b></p>	<p>Name.....</p> <p>Region.....District.....</p> <p>Address.....</p> <p>Phone/Mobile No.....</p> <p>Email Address .....</p> <p>Relationship.....</p>

**PROGRAMME OFFERED, DURATION AND MINIMUM ENTRANCE QUALIFICATIONS**

N/N	PROGRAMME	DURATION	MINIMUM ENTRANCE QUALIFICATIONS
	<p align="center"><b>ORDINARY DIPLOMA IN NURSING AND MIDWIFERY</b></p>	<p align="center"><b>3 YEARS</b></p>	<p><b>Holders of Certificates of Secondary Education Examination (CSEE) with Four (4) Passes in Non-Religious Subjects including “D” Passes in <u>Chemistry</u>, <u>Biology</u> and <u>Physics</u>. A Pass in Basic Mathematics and English Language is an Added Advantage!</b></p>

**APPLICANT AKNOWLEDGEMENT:**

I have read the instructions provided by **ST. THERESA SCHOOL OF NURSING** and certify that the information given above is correct.

I also understand that submission of false information may lead to disqualification and legal action taken against me.

Date.....Applicant’s Signature.....

**NOTE:**

1. **Application is open from May 27<sup>th</sup> to September 8<sup>th</sup> 2021**
2. This form should be returned to the Registrar ( Admission Officer) at St. Theresa School of Nursing **before 8<sup>th</sup> of September 2021**
3. Selected applicants will be notified (via phone call, sms text or email address) after **verification by NACTE**
4. More information is available on the joining instructions which are available in the Nursing School website.
5. Academic Year for 2021/2022 intake will commence in September/October. **Specific Date will be announced late.**
6. Candidates should be physically and mentally fit
7. Application Forms returned without BANK payment in slip will not be processed

8. Application fee (TZS 30,000 NOTE ‘Non- refundable’). Should be deposited through the **School BANK ACCOUNT Bellow;**

**NAME OF THE BANK:** NMB  
**ACOUNT NAME:** ST. THERESA SCHOOL OF NURSING  
**ACOUNT NUMBER:** 43510014012

9. The Applicant must submit the application Form with the following **attachments:-**
- **Copy of Form Four Secondary school certificate or valid Results slip**
  - **Copy of Birth Certificate**
  - **Original application fee (30,000/=)bank receipt or copy of receipt ( Non-refundable)**

**NOTE** Any Application submitted without the above attached documents will neither be accepted nor processed!

10. A duly filled application Form should be sent through our School email address or submitted physically to the school admission office through the Post office using the mail address given bellow. Make sure you use your most reliable way of posting your application or misplace it.

**ST. THERESA SCHOOL OF NURSING**  
**P.O. BOX 256, SOWETO-MOSHI**  
**KILIMANJARO**

**FOR OFFICIAL USE ONLY**

**FORM NO:** \_\_\_\_\_

**RECEIVED BY:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**CHECKED BY:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

REMARKS.....  
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**SR. WALTER MINJA**  
**PRINCIPAL**  
**ST. THERESA SCHOOL OF NURSING**



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**ST. THERESA SCHOOL OF NURSING AND MIDWIFERY FEES STRUCTURE  
 FOR THE FIRST YEAR ACADEMIC YEAR 2021/2022**

ITEM	(TSHS)	Per annum
Tuition Fees	1,100,000	
Accommodation	450,000	
Registration fee	25,000	
Identity Card	10,000	
Caution money	30,000	
Zone Examination	50,000	
Library & Internet services	60,000	
Stationeries	50,000	
<b>TOTAL</b>	<b><u>1,775,000</u></b>	
<b>OTHER COSTS</b>		
• NACTE Quality Assurance	15,000	
• *Health Insurance (NHIF) if you do not have***	50,400	
• Students Union fee	20,000	
• TNMC FEES	50,000	
• Practical book for midwifery & general nursing	50,000	
<b>TOTAL</b>	<b>185,400</b>	
<b>GRAND TOTAL</b>	<b><u>1,960,400</u></b>	

On the commencement of first semester, each student must deposit Half of the school fees Tshs 1,185,400/=. The remaining bill will be due on the beginning of the second semester which is 775,000. This bill must be deposited in the school bank accounts named below:

**NAME OF THE BANK:**

NMB

**ACCOUNT NAME:**

ST. THERESA SCHOOL OF NURSING

**ACCOUNT NUMBER:**

43510014012

OR

**NAME OF THE BANK:**

CRDB

**ACCOUNT NAME:**

ST. THERESA SCHOOL OF NURSING

**ACCOUNT NUMBER:**

015C586608300