FPCT- Sanjaranda Bible College and Rural Development P.O. Box 4, Itigi, Tanzania Contact person: (0) +255755 807 271 Email: <u>tuujohn@gmail.com</u> Website: www.sbctz.org ADMISSION APPLICATION FORM		
English Course- 3 Months to 9 months	September - November	
Computer Course- only 3 months	January – March	
	🔲 May - July	
PERSONAL INFO	RMATION	
Surname (Block letters):	PLACE PHOTO	
Other Names:		
Denomination:		
Date of Birth: Place of birth:		
Gender: Citizenship:		
Marital Status: Married 🗆 Single 🗆 Divorce 🗆 Wide	ow 🗆	
Permanent Address:		
Mobile No:Email:		
Contact Address of a person in case of Emergency:		
Mobile No: Email:		
EDUCATION BACKGROUND		
How many years did you spend in: Primary school		
Secondary school		
Other schools		
State your secular/professional work experience.		
PHYSICAL STATUS		
Do you have any physical disabilities? Yes	No	
If yes please explain:		
Are you in good health? Yes	No 🗌	



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## **MEDICAL REPORT**

INSTRUCTIONS: Places take the form to a qualified medical destarts complete you the employed			
<b>INSTRUCTIONS</b> : Please take the form to a qualified medical doctor to complete; you the applicant should then mail the completed form to the Registrar of SBC. Please print clearly and use a separate piece of paper if the space allotted is not enough.			
PERSONAL MEDICAL HISTORY			
<ol> <li>Is there any history of tuberculosis in your family? Yes No</li> <li>Do you have a chronic cough? Yes No</li> <li>Have you ever had a chest x-ray taken? yes No</li> <li>Have you ever had a chest x-ray taken? yes No</li> <li>Date of most recent chest x-ray</li></ol>			
Report of recent chest x-ray (within the last 6 months)			
MEDICAL CHECK UP			
INSTUCTIONS: The bearer of this medical report has applied for admission to Sanjaranda Bible College (SBC). All applicants are required to have this report completed by a medical doctor and a chest x-ray taken before being considered for admission. Please examine the applicant and answer the following questions. If you have any additional comments please write them on a separate piece of paper and attach to this report. Thank you for your assistance.			

Does the applicant have any evidence of the following?			
Tuberculosis Yes No Heart	problems Yes 🗌 No 🗌		
Infections Yes No Internal	parasites Yes 🗌 No 🛄		
Stomach or intestinal disorders Yes No Other contagious diseases Is there any medical reason, which might prevent the applicant from carrying a full load of studies at SBC?			
FEMALE APPLICANTS:         Is the applicant pregnant? Yes         If yes, how many weeks?			
Your Name	Date		
Address Sig	gnature Title		
Sta	imp		





## SCHOOL FEES ANALYSIS FOR COMPUTER AND ENGLISH COURSE

FPCT MEMBERS	NON FPCT MEMBERS
Tsh. 400,000/= per term	Tsh. 450,000/= per term
(3 months)	(3 months)

For day students, their school fees are analyzed as follows:

- 1. Introduction to Computers = Tsh. 20,000/-
- 2. Microsoft Word = Tsh. 30,000/-
- 3. Microsoft Excel = Tsh. 30,000/-
- 4. Microsoft Publisher = Tsh. 30,000/-
- 5. Microsoft Access =Tsh. 30,000/-
- 6. Microsoft PowerPoint = Tsh. 30,000/-
- 7. Internet & Email = Tsh. 30,000/-

**<u>NB</u>**: The above analysis for school fees can change any time.

- Tsh. 10,000/- for certificate
- Tsh. 10,000/- for FPCT Development
- Any other cost for handouts depends on a number of pages