

THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF EDUCATION, SCIENCE AND TECHNOLOGY
AGENCY FOR THE DEVELOPMENT OF EDUCATIONAL MANAGEMENT (ADEM)



**INTENTION FOR JOINING WITH DIPLOMA PROGRAMMES OFFERED BY ADEM
 IN THE ACADEMIC YEAR 2024/2025**

Fill this Form accurately and submit to ADEM together with copies of **Academic and Professional Certificate(s)** as well as **Bank Pay-in-slip** to the undersigned address.

PART A:

In the table below, put a tick (✓) against the course and Campus you wish to join

COURSE PROGRAMME	CAMPUSES		
	BAGAMOYO	MWANZA	MBEYA
Diploma in Education Leadership Management and Administration (DELMA)			
Diploma in School Quality Assurance (DSQA)			

PART B: PERSONAL INFORMATION

1. First name Middle Name Surname
 (as indicated in your CSEE)
2. Gender: Date of Birth Place of Birth Nationality
3. **Working Mailing Address:**
 P. O. Box Town/City.....
 District.....Region.....
 Country..... Phone number.....E-mail.....
4. (a) Next of Kin Details
 Name Phone Relationship
 District..... Town/City.....
5. The last primary school completed: Name.....
6. Applicant's details:
 (i) Current working place :.....(school) Position/Title.....
 (ii) Ward:.....District/Council.....Region.....
 (iii) Number of years.....(from first appointment). Phone number (employer).....

PART C: EDUCATION BACKGROUND:

7. Education and professional background (attach certificate copies)

Level of Education	Award	Year completed	Index number	Examination centre	Remarks

8. DECLARATION

I certify that the information provided above is true and complete in all aspects and I agree that ADEM retains the right to nullify my admission if the information provided is not correct.

Name.....signature.....date.....

9. ATTACHMENTS TO THE APPLICATION FORM (COMBINE ALL DOCUMENTS IN A SINGLE PDF FILE)

- a. Copies of Certificate(s) of Secondary Education Examination (CSEE)
- b. Copies of Academic Transcripts and Certificates
- c. Copy of Birth Certificate
- d. Bank pay-in-slip
- e. Copies of Professional Qualifications (Teaching profession)

APPLICATION FEE IS SHILLINGS.10,000/= WHICH SHOULD BE PAID THROUGH:

(i) NMB BANK BY FILLING PAY-IN-SLIP and quote CONTROL NUMBER 991250031466

(ii) M-Pesa,TIGO-Pesa or Airtel-Money under Government payment CONTROL NUMBER 991250031466

All non-Tanzanian certificates should be verified by NECTA or TCU before submitting for application.

Successful applicants shall be required to bring the original certificates for verification at the time of registration.

Submit your dully filled application form before 3rd October, 2024.

FOR FURTHER DETAILS PLEASE CONTACT:

1. 0754 573 871 - (Bagamoyo)

2. 0679 649 443- (Mwanza)

3. 0787226 552 - (Mbeya)

4. 0786848497 – (Bagamoyo,Mbeya,Mwanza)

ADDRESSES

SUBMIT YOUR APPLICATION FORM AT		
Chief Executive,		
ADEM-Bagamoyo,	ADEM-Mwanza Campus	ADEM-Mbeya Campus
P.O.Box 71, Bagamoyo	P.O.Box 1234,	P.O.Box 187,
E-mail: admission@adem.ac.tz	Mwanza	Mbeya
Website: www.adem.ac.tz	E-mail: ademwz@adem.ac.tz	E-mail: ademby@adem.ac.tz

and compulsory (should be filled)