

**KARAGWE INSTITUTE OF HEALTH AND ALLIED SCIENCES (KIHAS)**

**P. O. Box 451, Karagwe –Kagera -Tanzania.**

Phone: +225 745-666-787 / +225 784 480 413/+225 754-264-235

Website:

Email: [kiahskaragwe@gmail.com](mailto:kiahskaragwe@gmail.com)

*Attach four (4)  
recent passport  
size photographs*

**NACTE REGISTRATION: HAS/146**

**PHONE: +255 (0) 745 666 787**

**+255 (0) 784 480 413**

**+255 (0)753 264 235**

**ADDRESS P.O.BOX 451 Karagwe.**

**Kagera, Tanzania**

**WEBSITE:**

**E-MAIL: [kiahskaragwe@gmail.com](mailto:kiahskaragwe@gmail.com)**

**JOINING INSTRUCTION FOR ACADEMIC YEAR 2024/2025**

**Course offered**

- ❖ Technician Certificate in Pharmaceutical Sciences
- ❖ Technician Certificate in medical laboratory
- ❖ Technician Certificate in Laboratory Assistant
- ❖ Technician certificate in social work
- ❖ Ordinary Diploma in Pharmaceutical Sciences
- ❖ Ordinary Diploma in medical laboratory
- ❖ Diploma in Laboratory Assistants
- ❖ Ordinary diploma in social work

**APPLICATION FEE TSHS. 20,000/**

(Please fill the information in CAPITAL LETTERS ONLY)



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**PERSONAL PARTICULARS**

Date./.../.../2024

Names (in full) First name ..... Middle name.....  
Surname ..... Address ..... Phone No.....  
O'Level / A' Level Examination No.....

**REF: JOINING INSTRUCTION FOR THE ACADEMIC YEAR 2024/2025**

We are pleased to inform you that you have been selected to join at Karagwe Institute of Health and Allied Sciences for the program of:

**ORDINARY DIPLOMA IN PHARMACEUTICAL SCIENCES**

Please report at the college on **09<sup>th</sup> September 2024**.

**GENERAL REQUIREMENTS**

1. No candidate shall be registered into a program that He/ She were not admitted for. Also switching between programs after registration shall not be entertained.
2. The names entered in this form must be exactly the same as those appearing on your ORIGINAL Academic certificates
3. Fee once paid shall not be refunded or transferred to the next academic year or transferred to any other part.
4. No candidate shall be registered without payment of the required fee as indicated on fee structure mode of payment or production of proof for sponsorship. The college does not offer scholarship neither facilitate candidate to get the one.
5. The college fee and other contribution should be payable through **NMB BANK ACCOUNT NO. 31910007550, Name: Karagwe Institute Of Allied Health Sciences.**
6. Examination fee paid is for that particular academic year and it may be reviewed from time to time.

**COLLEGE CANDIDATE REGULATIONS AND EXAMINATION POLICY**

Each candidate shall be issued with copies of the college Regulations upon registration. The candidate is required to read these documents very carefully because it provides a useful guide when he/she stays at college.

**REGISTRATION**

On arrival the candidate shall report to the Admission office for Registration. If he /she arrive after office hours he/ she shall contact admission officer through phone no. **0745 666 787/ 0753 264 235/0763569269** for temporally consultation.

For registration purpose all of the following shall be required:

- I. Relevant original certificate and transcript at all sitting
- II. Result slip shall be accepted for form four levers of **2023** only
- III. Three recently passport size photographs
- IV. Proof that the candidate has paid the college fee by showing relevant bank pay slip
- V. Original Joining Instruction and Application form well filled for documentation purpose
- VI. None Tanzanian citizens must provide passport
- VII. Original Birth certificate
- VIII. Dully filled Medical examination Form

**NB**

- I. No candidate shall be registered if original certificate are not produced
- II. Submission of forged certificate is a criminal offence. Any candidate submitting such documents shall be prosecuted in the court of law

### SPONSORSHIP

Sponsorship should be accept for Tanzania citizens only

### ACCOMODATION

Collage offers accommodation for all students regardless to his / her place or residence. Students shall have to pay the required rental charges first before being allowed to inter in the room

Student must report with the following things for his/ her own accommodation

Mattress of 2.5 inch wide and length 6 inch, 2pair of bed sheet, 1 blanket, Towel, Snicker, Mosquito Net and bucket

### UNIFORM

1. All students should possess a proper uniform proposed by the college authority. Uniform for all courses are offered here at the college. Once a student admitted, procedures of offering uniform are followed immediately. (Home dresses arrowed after class time).
2. All students should come with black flat shoes and white socks

### MEALS

There is cafeteria for serving all meals( Breakfast, Lunch and Dinner) at affordable price, Total coast per day is about Tsh.2,500/= This amount shall not paid to college.

### NOTE

1. Every student must come with four (4) rim paper A4 SIZE, two (2) should be submitted during reporting time at first semester and other two (2) should be submitted during second semester.
2. Five Counter book, pen , ruler and pencils
3. Every student must come with health insurance card /health insurance fee **TSH 50,400/=**during reporting time, this amount shall not be paid to collage bank account number

Program	Duration of the course	Tuition fee per annual	Entry requirement
Technician Certificate and Ordinary Diploma in Pharmaceuatical Sciences	2 &3 years	1,000,000/=	Minimum 4 Passes in non-religious subjects including Pass (D) in biology, chemistry, and any other two subjects.
Technician Certificate and Ordinary Diploma in medical laboratory	2 &3 years	1,000,000/=	Minimum 4 Passes in non-religious subjects including Pass (D) in biology, chemistry, physics and any other subject
Technician certificate and Ordinary Diploma in social work	2& 3 years	800,000/=	Minimum 4 Passes of any subject excluding religious subjects

**Other charges**

SN	ITEM	AMOUNT	RESPONSIBLE	TIME
	IDENTITY card	10,000/=	ALL	Once at the begin of first semester
	Uniform	125,000/=	MLT & PHARMACY	Once at the begin of first semester
	Uniform	65,000/=	SOCIAL WORK	Once at the begin of first semester
	NACTE Quality Assurance Fee	15,000/=	ALL	Every year at the begin of the first semester
	Internal Examination	150,000/=	ALL	Every year at the begin of the first semester
	Caution Money	50,000/=	ALL	Once at the begin of first semester
	Hostel	100,000/=	ALL	Every year at the begin of the first Semester and second semester
	Sport and Game	25,000/=	ALL	At the begin of first semester
	Library service	20,000/=	ALL	At begin of first semester
	Procedure book Scientific calculator	50,000/= 50,000/=	Medical Lab. Students Both medical lab &Pharmacy student	Every year at the beginning of the second semester. Every year at the beginning of first semester

**OTHER PAYMENTS DEPENDS WITH YOUR COURSE/PROGRAM AND YEAR OF STUDY**

Field in pharmaceutical Sciences, Medical Lab and Social Work.	<b>350,000/</b>	All students with field	Every year at the begin of the semester with Field
Supplementary/Special Examination	<b>50,000/</b>	All modules	After declaration of end of semester one results
Appeal	<b>30,000/</b>	Per module	Within 14 days after declaration of Results

**NATIONAL EXAMINATION FEE IS OUT OF FEE AND OTHER CHARGES.**

<b>National Examination fee</b>	<b>150,000/=(subject to change depend with directive from NACTE)</b>	<b>ALL</b>	<b>At the begin of Every Second Semester</b>
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**PAYMENT MODE IN INSTALLMENTS FOR EACH COURSE**

<b>PHARMACEUTICAL SCIENCES</b>		
<b>FIRST SEMESTER</b>	<b>AMOUNT</b>	<b>PERIOD</b>
First installment (September-October)	710,000/=	At the begin of 1 <sup>st</sup> semester
Second Installment (November)	300,000/=	Two months after begin of 1 <sup>st</sup> semester
Third installment(February)	352,000/=	1 <sup>st</sup> semester
<b>SUB TOTAL</b>	<b>1,362,000/=</b>	
<b>SECOND SEMESTER</b>		
Fourth installment(April)	346,000/=	At the begin of 2 <sup>nd</sup> semester
Fifth installment (June)	287,000/=	Two months after begin of 2 <sup>nd</sup> semester
<b>SUB TOTAL</b>	<b>633,000/=</b>	
<b>TOTAL</b>	<b>1,995,000/=</b>	

<b>MEDICAL LABORATORY SCIENCES</b>		
<b>FIRST SEMESTER</b>	<b>AMOUNT</b>	<b>PERIOD</b>
First installment(September-October)	750,000/=	At the begin of 1 <sup>st</sup> semester
Second Installment(November)	300,000/=	Two months after begin of 1 <sup>st</sup> semester
Third installment(February)	362,000/=	1 <sup>st</sup> semester
<b>SUB TOTAL</b>	<b>1,412,000/=</b>	
<b>SECOND SEMESTER</b>		
Fourth installment(April)	346,000/=	At the begin of 2 <sup>nd</sup> semester
Fifth installment(June)	287,000/=	2 <sup>nd</sup> semester
<b>SUB TOTAL</b>	<b>633,000/=</b>	
<b>TOTAL</b>	<b>2,045,000/=</b>	

<b>SOCIAL WORK</b>		
<b>FIRST SEMESTER</b>	<b>AMOUNT</b>	<b>PERIOD</b>
First installment(September –October)	560,000/=	At the begin of 1 <sup>st</sup> semester
Second Installment (November)	250,000/=	Two months after begin of 1 <sup>st</sup> semester
Third installment(February)	250,000/=	1 <sup>st</sup> semester
<b>SUB TOTAL</b>	<b>1,060,000/=</b>	
<b>SECOND SEMESTER</b>		
Fourth installment(April)	360,000/=	At the begin of 2 <sup>nd</sup> semester
Fifth installment(June)	235,000/=	2 <sup>nd</sup> semester
<b>SUB TOTAL</b>	<b>595,000/=</b>	
<b>TOTAL</b>	<b>1,655,000/=</b>	

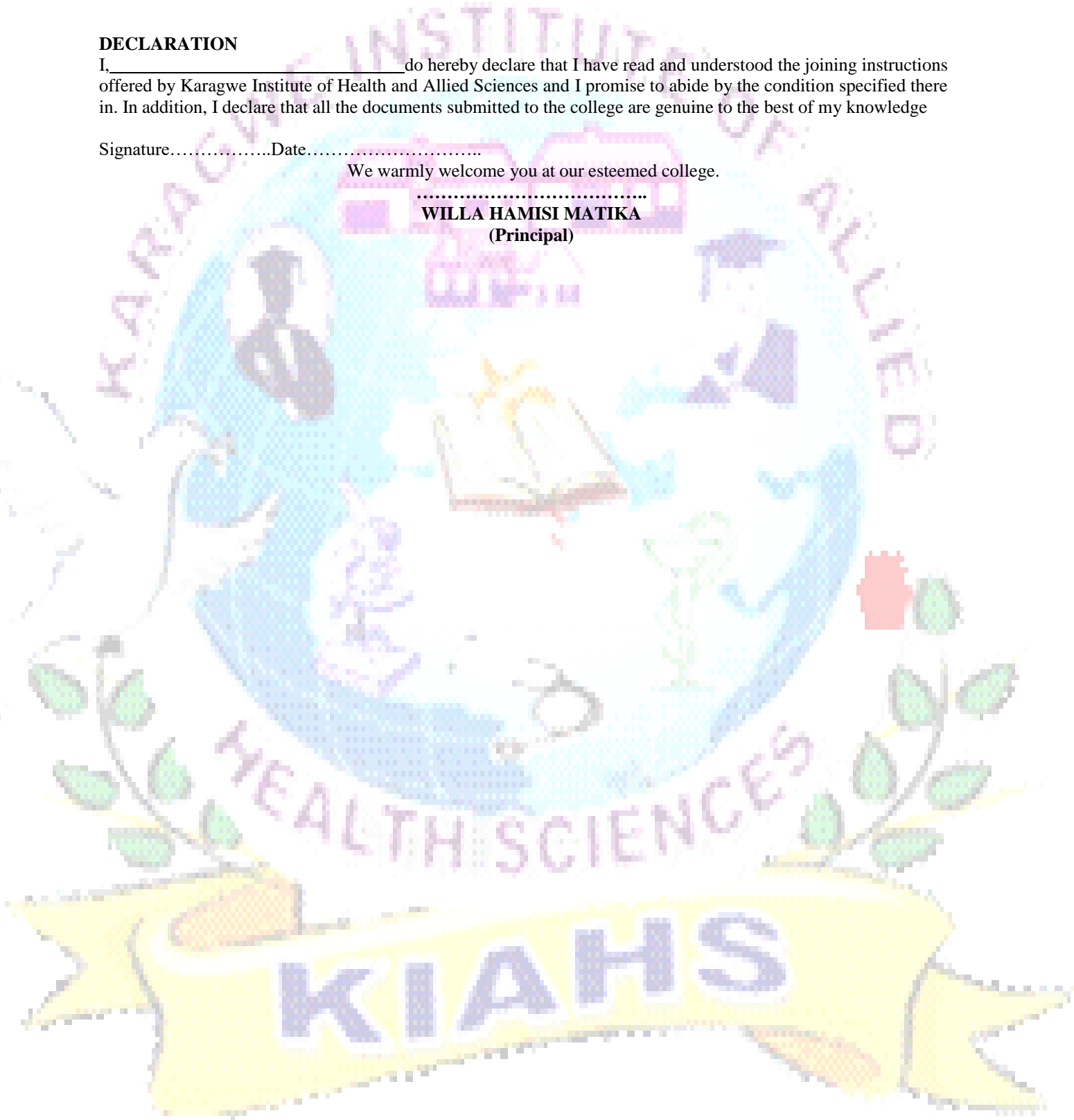
**DECLARATION**

I, \_\_\_\_\_ do hereby declare that I have read and understood the joining instructions offered by Karagwe Institute of Health and Allied Sciences and I promise to abide by the condition specified there in. In addition, I declare that all the documents submitted to the college are genuine to the best of my knowledge

Signature.....Date.....

We warmly welcome you at our esteemed college.

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**WILLA HAMISI MATIKA**  
**(Principal)**



EXAMINATION FORM.

Full name						
Check for	BP	STOOL	URINE	HIV	UPT	VDRL
		Macro-	Macro-			
		Micro -	Micro -			

He/she is physically fit/ unfit to follow this course

Tested by: ..... Designation: ..... Signature: .....

Date: ...../...../20..... Station: .....

Official stamp.....

