

# INSTITUTE OF SOCIAL WORK

Phone: 0654205553  
Fax: 2701375  
Email: [principal.kisangara@isw.ac.tz](mailto:principal.kisangara@isw.ac.tz)  
Website: [www.isw.ac.tz](http://www.isw.ac.tz)



P. O. Box 167,  
Mwanga,  
Kilimanjaro.

10/03/2024

ADMISSION NO. ISW/BTCSW

TO: .....

RE: **JOINING INSTRUCTIONS FOR BASIC TECHNICIAN CERTIFICATE IN SOCIAL WORK  
(NTA LEVEL 4) MARCH INTAKE-KISANGARA CAMPUS**

We are pleased to inform you that you have been selected to join a **One Year Basic Technician Certificate in Social Work** at the Institute of Social Work for the 2024/ 2025 academic year. On behalf of the Board of Governors, the Management takes this opportunity to congratulate you for your success. You are required to report to the Institute on 25<sup>th</sup> March, 2024 for orientation and registration at Kisangara Campus, Mwanga - Kilimanjaro.

## 1.) Conditions for Registration

### a) Payment of tuition fee

Prospective students are required to pay tuition fee in four installments. To be registered, they should pay full amount of the first installment (see payment schedule in the fee structure attached). Medical insurance (NHIF) is **mandatory**. Therefore you are required to either pay the prescribed amount or produce a valid insurance card at registration. Failure to do that disqualifies you from registration. **Please note that, fees once paid is nonrefundable. Note also that students aged 18 years and above are required to have a National ID number to register successfully with NHIF (This is a MUST HAVE).**

### b) Mode of Payment

All payment should be made through the Student Information Management System (SIMS). Ensure you get a Control Number for the Government electronic Payment Gateway (GePG). **Don't pay through our help desk lines below.** Payment procedures are as follows:

i) Go to Institute website [www.isw.ac.tz](http://www.isw.ac.tz) and click **Student Information Management System**

ii) Log into SIMS by entering your Admission Number as **Username** and your surname in CAPITAL LETTERS as **Password**

iii) Click the **Payment** button

iv) Click **Fee Structure** button, after selecting your Academic Year, Program and Class, then Click **Preview Invoice** button

v) Select your **mode of Payments Control Number** where all payment instructions are clearly indicated. For Further assistance, please **Call our help desk line 0716121096 (Admission Office).**

**c) Medical Examination**

Registration of prospective students is subject to provision of satisfactory medical report from a recognized or registered medical practitioner. The forms should be brought to the Institute during the orientation period.

**d) Original and Photocopies of Certificates**

All prospective students are supposed to come with Original Birth Certificates, and 2 photocopies of Academic Certificates for verification.

**e) Passport Size Photographs**

All prospective students should bring with them four colored passport size photographs taken recently. These photographs are for registration purposes and student identity cards.

**f) Letter of Acceptance**

Each prospective student has to sign and return a letter of acceptance on arrival at the Institute.

**2. Adherence to Institute's Rules, Regulations and by -laws**

Prospective students are admitted into the Institute on the understanding that they will adhere to its rules, regulations and by -laws as clearly stipulated in the Institute Prospectus (2022/2023 -2023/2024). As such, the Institute expects students' behavior both on and off campus to be ethically accepted. **NOTE: Institute of Social Work students shall always be expected to dress decently. Shoes allowed as part of the dress must be black and covered Sandals are strictly not allowed within the campus premises.**

**3. Additional Information**

**(a) Traveling Arrangements**

Your employer/ sponsor/ parent will be responsible for all your traveling costs to and from the Institute during vacations. No students will be allowed to stay at the Institute during long vocations.

**(b) Hostel Accommodation**

The Institute has limited accommodation services for female students within the campus. The Institute Hostel fee is TZS. 380,000/ - per year **and it is mandatory for all female students to reside in campus hostel in order to protect them since they are still young.** However, there are private hostel services for students near the Institute ranging approximately from TZS. 600,000/ - to TZS. 720,000/ - per year.

**(c) Meals**

The Institute has a cafeteria. All students are encouraged to have their meals in the cafeteria to avoid eating in unhygienic places. Each student bears his/her own cost for his/her daily meals.

Once again, I welcome you to the Institute and wish you a good stay for the entire duration of your studies.

All the best,



**Dr. Joyce Nyoni  
RECTOR**

**LETTER OF ACCEPTANCE**

I..... do hereby

(Full Name)

Accept/ do not accept the offer given to me to pursue the course applied for at the Institute of Social Work, Kisangara Campus. I shall abide to all term and conditions of the Institute's Regulations. I also accept the offer of a hostel (female) students within the Institute's hostel.

Signature: .....

Date: .....

**SPONSORSHIP**

I .....

of .....

do agree to sponsor.....

(Name of Student)

for the course he/ she has applied for at the Institute of Social Work, Kisangara Campus.

Signature and official Stamp.....

Date: .....

This form must be returned to the Institute of Social Work.

Note that no student will be registered without producing a receipt showing that the cost payable to the Institute has been paid.

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## REQUEST FOR MEDICAL EXAMINATION

### PART A: TO BE COMPLETED BY THE STUDENT

FULL NAME (IN BLOCK CAPITALS)	SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS	DATE OF BIRTH
NATIONALITY	

### FAMILY HISTORY

Have any member of your family had the following illnesses or disorders?	Yes	No
High Blood Pressure	<input type="checkbox"/>	<input type="checkbox"/>
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>
Cancer	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>
Mental Disorders	<input type="checkbox"/>	<input type="checkbox"/>
Paralysis	<input type="checkbox"/>	<input type="checkbox"/>

### PART B: TO BE COMPLETED BY A MEDICAL DOCTOR/OFFICER

#### Hospital

Please examine the above named as to his/her fitness for admission as a student at the Institute of Social Work.

Check +Ve or -Ve

	+Ve	-Ve		+Ve	-Ve		+Ve	-Ve		+Ve	-Ve
Frequent sore throats	<input type="checkbox"/>	<input type="checkbox"/>	Heart and blood vessel disease	<input type="checkbox"/>	<input type="checkbox"/>	Urinary disorder	<input type="checkbox"/>	<input type="checkbox"/>	Fainting spells	<input type="checkbox"/>	<input type="checkbox"/>
Hay fever	<input type="checkbox"/>	<input type="checkbox"/>	Ulcer of stomach or duodenum	<input type="checkbox"/>	<input type="checkbox"/>	Kidney trouble	<input type="checkbox"/>	<input type="checkbox"/>	Shortsighted or longsighted	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	Jaundice	<input type="checkbox"/>	<input type="checkbox"/>	Physical Disability	<input type="checkbox"/>	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>	Gall stones	<input type="checkbox"/>	<input type="checkbox"/>	Back pain	<input type="checkbox"/>	<input type="checkbox"/>	Others (Please specify)		
Pneumonia	<input type="checkbox"/>	<input type="checkbox"/>	Hernia	<input type="checkbox"/>	<input type="checkbox"/>	Joint problems	<input type="checkbox"/>	<input type="checkbox"/>			
Pleurisy	<input type="checkbox"/>	<input type="checkbox"/>	Haemorrhoids	<input type="checkbox"/>	<input type="checkbox"/>	Skin disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Repeated bronchitis	<input type="checkbox"/>	<input type="checkbox"/>	Malaria	<input type="checkbox"/>	<input type="checkbox"/>	Sleeplessness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Rheumatic fever	<input type="checkbox"/>	<input type="checkbox"/>	Amoebic dysentery	<input type="checkbox"/>	<input type="checkbox"/>	Nervous or mental disorder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
High blood pressure	<input type="checkbox"/>	<input type="checkbox"/>	Gonorrhoea	<input type="checkbox"/>	<input type="checkbox"/>	Headaches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Comments (Please comment on findings)

Conclusions (Please state your opinion on the physical and mental fitness)

Name of the examining physician (in block capitals):

Signature: \_\_\_\_\_

Address:

Date: (d/m/y): \_\_\_\_\_

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18/ 10, 2022

Attention to : ALL STUDENTS

## INSTITUTE OF SOCIAL WORK FEE STRUCTURE/ PAYMENT SCHEDULE 2021/2022

	Description	Masters Degree in Social Work Foundation	Masters Degree in Social Work Advance (1 - Year program)	Masters Degree in Human Resource(2 Years Program)	Post Graduate Diploma (1 - Year program)	Bachelor Degree	Ordinary Diploma	Technician Certificate	Basic Technician Certificate
		NTA Level 9				NTA Level 17-8	NTA Level 6	NTA Level 5	NTA Level 4
1	Tuition Fee	1,980,000	4,030,000	3,500,000	1,849,000	1,279,000	984,000	984,000	794,000
2	Registration	50,000	50,000	50,000	15,000	15,000	15,000	15,000	15,000
3	Research/Project supervision	-	500,000	500,000	-	-	-	-	-
4	NACTE Fee	20,000	20,000	20,000	-	20,000	15,000	15,000	15,000
5	Library Fee	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
6	Caution Money	50,000	50,000	50,000	13,000	13,000	13,000	13,000	13,000
7	Identity Card	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
8	Prospectus	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000
9	Sports and Games	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
10	Student Union	15,000	15,000	150,000	13,000	13,000	13,000	13,000	13,000
11	NHIF Card*	-----	-----	-----	-----	50,400	50,400	50,400	50,400
12	Defense Logistic	--	---	150,000	---	---	---	---	-----
	<b>Total</b>	<b>2,165,000</b>	<b>4,715,000</b>	<b>4,335,000</b>	<b>1,940,000</b>	<b>1,440,400</b>	<b>1,140,400</b>	<b>1,140,400</b>	<b>950,400</b>

\* Paid in case one doesn't have NHIF Card/Membership

**PAYMENT SCHEDULE FOR ORDINARY DIPLOMA, TECHNICIAN CERTIFICATE AND BASIC  
TECHNICIAN CERTIFICATE PROGRAMS**

<b>Payment Date</b>	<b>Ordinary Diploma</b>	<b>Technician Certificate</b>	<b>Basic Technician Certificate</b>
<b>1st Installment</b>	369,400.00	402,400	354,900
<b>2nd Installment</b>	246,000.00	246,000	198,500
<b>3rd Installment</b>	246,000.00	246,000	198,500
<b>4th Installment</b>	246,000.00	246,000	198,500
<b>Total</b>	<b>1,107,400</b>	<b>1,140,400</b>	<b>950,400</b>

**NOTE: The New Payment Schedule is effective from 2021/2022 Academic Year.**

**Issued by:**  
***Chief Accountant***  
***Institute of Social Work***