



EAST EVAN COLLEGE OF HEALTH AND ALLIED SCIENCES

*Prestige Silva Heritage Park, Block D Kimbiji Kijaka,
Plot 90, P O Box 15805, Kigamboni, Dar Es Salaam*

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REG / HAS /211

JOINING INSTRUCTION FORM TO DIPLOMA/CERTIFICATE PROGRAMMES FOR ACADEMIC YEAR 2025/2026

(Please read carefully the Instructions before filling in this application form and be reminded that it's a criminal

Offense to submit false information/documents)

PART 1: INSTRUCTIONS

1. The dully filled application form should be returned along with certified photocopies of Certificates, Academic transcript and original bank pay –in-slip (which should bear the names of the applicant).
2. Application Form is obtained from the Admission Office at Tzs. 30,000 (thirty thousand only)
3. Registration Fee is obtained from the Admission Office at Tzs 15,000 for Pharmacy and Tzs 25,000 for other courses.

PART 2: ADMISSION REQUIREMENT

1. Completed medical examination form
2. Original Certificates of Secondary education
3. Application Form and the Admission letter
4. Evidence of payment of the fees and other charges
5. Birth Certificate or an affidavit
6. Colored pass port size photos (4)

PART 3: COURSE REQUIREMENT

Clinical medicine	Pharmaceutical science	Laboratory Assistant/ Medical Laboratory Attendant	Community Development /Health Records & Information Technology	Medical attendant
Full set of clinical tools ✦ Full set of Clinical Tools/equipment ✦ box of Surgical gloves	✦ Calculator ✦ Tanzania Pharmaceutical Handbook ✦ Gloves- 1 box ✦ Towel	Calculator	✦ A Laptop and Scientific Calculator are recommended for the IT students	Full set of clinical tools ✦ Full set of Clinical Tools/equipment ✦ 1box of Surgical gloves

PART 4: FEE STRUCTURE

Below is the Tuition fee for each course and other financial requirement.

Sn	Item	Pharmacy Tzs	Laboratory Assistants Tzs/ Medical Laboratory Attendant	Clinical Medicine Tzs	Health Records & Information Technology (Tzs)	Community Development Tzs	Medical Attendant Tzs
1	Tuition Fee	1,500,000	720,000	1,600,000	1,100,000	900,000	720,000
2	Other charges	600,000	400,000	600,000	500,000	500,000	300,000
Total		2,100,000	1,120,000	2,200,000	1,600,000	1,400,000	1,020,000

PART 5: FEE PAYMENT SCHEDULE

It is obligatory that fees are paid strictly based on the payment schedule. Students are however encouraged to enter into agreement with the Finance in which case the payment may be made monthly provided that the whole amount of the fee per semester is fully covered, as a matter of principal the **“Fees could be paid based on monthly basis starting with Tzs 300,000 per month”**.

Sn	Timing	Pharmacy	Laboratory Assistant/ Medical Laboratory Assistant	Clinical Medicine	Health Records &Information Technology ¹	Community Development	Medical Attendant
1	At the Beginning of 1 st Semester (Reporting Date)	Tzs 700,000	Tzs 350,0000	Tzs 700,000	Tzs 500,0000	Tzs 400,000	Tzs 300,000
2	Before Continuing Assessment 2 (January 01,2025)	Tzs 350,000	Tzs 210,000	Tzs 400,000	Tzs 300,000	Tzs 300,000	Tzs 210,000
3	At the Beginning of Second Semester (April 01, 2025)	Tzs 700,000	Tzs 350,000	Tzs 700,000	Tzs 500,0000	Tzs 400,000	Tzs 300,000
4	Before Continuous Assessment 4 (June 01, 2025)	Tzs 350,000	Tzs 210,000	Tzs 400,000	Tzs 300,000	Tzs 300,000	Tzs 210,000

PART 6: OTHER PAYMENTS³

¹ The Medical Records & Information Technology Course qualify for the funding under the High Education Students Loan Board , students who wish to pursue this course are encouraged to apply directly for from HESLB ³ All payments must be done one months before the happening of the event

Item	Amount	Description
Clinical Rotation - Clinical Medicine	Tzs 300,000	All Clinical medicine students per each clinical rotation
Pharmacy Practice	Tzs 100,000	All Students with Pharmacy Practice Field
Log Book for Compounding Practice	Tzs 15,000	Pharmaceutical Science Students Semester II of Level 4&5
Field Work for Health Records and Information Technology students	Tzs 200,000	Per each Field Work
Field Work: Laboratory Assistant /Community Development/ Medical Attendant/ Medical Laboratory Attendant	Tzs 100,000	All other Students with Field Attachment
Supplementary (External Exams)	Tzs 100,000	Per Module
Repeat Module (s)	Tzs 500,000	All Modules
Special Exams (Internal Exams)	Tzs 50,000	Per Module
Local Examination Fee Semester one	Tzs 50,000	All students
Appeal	Tzs 50,000	Per Module
Medical Capitation with NHIF	Tzs 50,400	All Students, paid directly to NHIF
National/Annual/Final Examination fee	Tzs 150,000	All students - CMT,PST,HRIT and LAB
Final Examination Fee for MAT & CDT	Tzs 150,000	All students -Medical Attendant and Community Development
Graduation	Tzs 70,000	Finalist

PART 7: MODE OF PAYMENT

- ✦ All payments are non-refundable
- ✦ The fee structure is annual, the management reserves the right to change the fees structure at the end of each academic year ☐ A Bank pay in slip should be submitted to Finance on reporting to the College before admission.
- ✦ No student shall be accepted to the College without settling the first installment.
- ✦ **Account Number :0150522486500 Account Name: Evan College – for fees**
- ✦ **Account Number :0150522486501 Account Name: Evan College – other charges use**
- ✦ **Account Number NMB: 25510003068 Account Name: East Evan College—For Fee**
- ✦ **Account Number NMB: 25510003071 Account Name: East Evan College—For Exams**
- ✦ **Account Number NMB: 25510003072 Account Name: East Evan College—For Field**

- ✦ Payment made by M-Pesa, Tigo Pesa and Airtel Money must be done upon obtaining control number

PART 8: COLLEGE UNIFORM⁴

Course	Male	Female
Pharmacy, Health	Two White Shirts with short sleeves	Two White Gowns with short sleeves (Decent one- below knees)
Records & Information Technology & Clinical Medicine	Khaki colored 2 pairs of trousers (Cotton materials)	Flat Black Shoes and White socks (Open shoes/sandals are not allowed during class hours)
	Black leather shoes (Open shoes/sandals are not allowed), white socks 1 White clinical/lab coat	1 White socks 1 White clinical/lab coat (White hijab for Muslims only)
Laboratory Assistants	Two White Shirts with short sleeves	Two White short dresses with long sleeves
	Dark Blue colored 2 pairs of trousers (Cotton materials)	Dark Blue colored 2 pairs of trousers (Cotton materials)
	1 Laboratory coat	1 laboratory coat
	Black or brown leather shoes (Open shoes/sandals are not allowed during class hours) White socks	Flat Black or brown Shoes (Open shoes/sandals are not allowed during class hours), white socks (White hijab for Muslims only)
Community Development	Two White shirts with short sleeves	Two White short dresses with long sleeves
	Two pairs of Black colored trousers (cotton material)	Two pairs of Black colored trousers (White hijab for Muslims only)

Note: College Uniforms must have a college logo; Uniforms must be purchased at the campus for Tzs 60,000/= and 35,000 Lab coat to all students as stipulated above.

	Black or brown leather shoes (Open shoes/sandals are not allowed during class hours) White socks	Flat Black or brown leather shoes (Open shoes/sandals are not allowed during class hours) White socks
Medical Attendant	Two Green shirts with short sleeves	Two Green shirts with short sleeves (White hijab for Muslims only)
	Two green trousers (Cotton material)	Two green trousers (Cotton material)
	Black or brown leather shoes (Open shoes/sandals are not allowed during class hours) White socks	Flat Black or brown leather shoes (Open shoes/sandals are not allowed during class hours) with White socks

PART 9: REQUIREMENTS FOR BOARDING HOSTEL/CAFETERIA

1. Cafeteria and Canteen services

The College provides no food; however, the cafeteria is open for students at prescribed times to cater for students' meals need.

2. Residence facility

The College provides a room and a bed. Students are required to bring with them:

- ✦ The mattress (3 x 6)
- ✦ A blanket
- ✦ 4 bed sheets
- ✦ 1 pillow + 2 pillow cases
- ✦ 1 mosquito net
- ✦ 1 bucket
- ✦ Towels
- ✦ Open shoes/sandals and casual canvas shoes

Students are required to sign resident (hostel) rules and regulations, any violation of these rules and regulation will amount to students to be expelled from the facility. Students must pay for the Tzs 20,000 to meet the cost of water that is paid for each semester. The hostel electricity bill is shared by all residents.

**PART 12: STUDENT AND PARENTS'S DECLARATION ON INSTITUTE REGULATIONS
AND BY-LAWS**

I.....(Name of student) (Surname, Middle name,
First name) of.....(Postal Address) DO HEREBY accept and
promise to adhere to regulations and by-laws of the Institute as stipulated in this declaration form. I
understand that any breaching of the regulations and by-laws stated therein will result in discontinuation
and expulsion from the Institute. SIGNED AND DELIVERED this.....day of.... (month)
.....(year)
..... (Student's Signature)

PASSPORT SIZE



I, (Name)
Parent/Guardian/Employer (Surname, Middle name, First name) of.....
(Name of Student) DO HEREBY confirm the acceptance of the above-mentioned student to follow and
adhere to Institute regulations and by-laws as stipulated in this Declaration form. I understand that any
breaching of any of the regulations and bylaws stated therein will result into discontinuation and expulsion
of the student from the Institute. SIGNED AND DELIVERED this....day
of.....(month).....(year)(Signature of
Parent/Guardian/Employer) Tel. noEmail

All inquiries and duly filled Applicant forms should be addressed to: -

Dr. Maulishaz C. Paschal

Principal

East Evan College of Health and Allied Sciences,
Prestige Silva Heritage Park, Block D Kimbiji Kijaka,
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**WELCOME TO THE CENTER OF EXCELLENCY
EAST EVAN COLLEGE OF HEALTH AND ALLIED SCIENCES**

MEDICAL EXAMINATION FORM
(To be filled by a Medical Officer)

FULL NAME OF STUDENT.....

SEX: MALE/FEMALE.....

HB TEST:

BLOOD GROUP:

STOOL:

URINE MICRO.....

T.B TEST.....

EYE EXAMINATION.....

E.N.T.....

CHEST.....

CHEST X-RAY.....

ABDOMEN.....

ADDITIONAL INFORMATION (Physical Defects of Impairments, Infections, Chronic, or Hereditary
(family) Disease)

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I certify that I have examined the above Student and consider that he/she is physically/not physically fit for
further studies.

NAME: _____

SIGNATURE: _____

DATE: _____

(official stamp)