

# **APPLICATION FORM**

DOC No: SATC/AF/022

# **Trainee Application Form for Certificate / Diploma Courses**

# (To be filled in Capital letters)

Surname	:						
Other Names	:						
Address	:						
Telephone	: E-mail :						
Gender: (M) (F) Date of birth:							
Nationality:		ID/Passport NO	D:				
Indicate The Courses Applied For In Order Of Preference:							
CHOICE			COURSE				
1.							
2.							
3.							
Centre's/Department							
·							
Intake Date PREVIOUS E	DUCATION:	Mode of Study:	Full Time /	Part Time / Online			
Intake Date PREVIOUS E							
Intake Date PREVIOUS E	DUCATION:	Mode of Study:	Full Time /	Part Time / Online			
Intake Date PREVIOUS E	DUCATION:	Mode of Study:	Full Time /	Part Time / Online			
Intake Date PREVIOUS E	DUCATION:	Mode of Study:	Full Time /	Part Time / Online			



<u>N/B:</u> (Attach certified copies of the relevant certifications and four passport sized photographs)

<u>SPONSORSHII</u>	<u>-</u>
Self: []	
Others (Parents	, Guardian or Organization):
Address	:
Telephone	:
Contact person	:
Name and addre	ess of nearest relative, person or agency to be contacted in case of,
Emergency;	
Name	:
Relationship	:
Address	:
Telephone	:

## **TERMS AND CONDITIONS**

- 1. Course fees must be paid in advance at the time of booking, unless prior credit arrangements are made and approved by an authorized officer of the company.
- 2. Where credit is granted, the account must be settled within the agreed period otherwise a monthly penalty charge of 3% will be levied on a cumulative basis.
- 3. There will be no refund of any bookings cancelled or abandonment of classes once they have commenced.
- 4. Trainees will be charged for any damage caused to equipment by their negligence.
- 5. Certificates will only be awarded after the fulfillment of all the particular courses requirements.

#### OTHER SCHOOL RULES AND REGULATIONS

## **CONDUCT AND ATTITUDE:**

All trainees are expected to be respectful and courteous while on the Training Centre. Trainees should not be impaired by alcohol or illegal drugs while on Training Center.



Violent, threatening, humiliating, abusive behavior or harassment of others is also not tolerated and is grounds for immediate dismissal.

## **ATTENDANCE, MISSED CLASSES AND TARDINESS:**

The total number of hours from absences, tardiness, and leaving classes early per term must not exceed more than 15 hours.

#### **MAKE-UP WORK:**

Instructors have the option of deducting points for assignments that are handed in late. All homework and assignments must be satisfactory and handed in by the last day of classes.

### **LEAVE OF ABSENCE:**

A student must complete the stipulated terms of course work within the given study period. Trainee may take a leave of absence and still graduate as long as all requirements are fulfilled within the period of study.

In cases of emergencies and family problems, a trainee may be granted a leave of absence for a reasonable amount of time as determined by the accountable manager. A request for a leave of absence must be in writing and the date of expected return must be specified.

If the trainee does not re-enter within the specified time and has not notified the school, the student's contract will be terminated.

### **PROBATION:**

A trainee that does not adhere to the attendance policy will be placed on probation for **30 days**. If the student has not corrected the attendance problem within 30 days, the trainee will be counseled from the course, with a possibility of termination.

### **RE-ENTRY:**

A student whose attendance has been terminated and desires to re-enter the program, must notify the training center and be interviewed by the administrator. The accountable manager's decision is final. If the accountable manager approves, the trainee may re-apply following the required admission procedures.

#### **DECLARATIONS:**

I certify that the information/statements made by me on this form are correct and complete. I further certify that I have read, understood and agreed to comply with the terms stipulated herein.

Signature:	Date:

#### SPONSOR'S UNDERTAKING

We, the undersigned, hereby confirm that the applicant will be sponsored by ourselves for the listed courses.



Please bil	I us. Payments	will be made v	within		Days.			
Name of	sponsor :							
Authorize	d signature		[	Oate:				
before q	to be paid at the ualifying for reg		nk Account in TZ on-refundable Ap		_			
	l applicants. r payment optio	ns please liais	son with Centre's	Management f	or Authorizati	ion.		
Bank Name	: NATIO	ONAL BANK (	OF COMMERCE	LTD (NBC Ltd)	)			
Acc. Name	: SOMA	AVIATION	TRAINING CEN	TRE LTD				
Acc. Numbe	r : <b>USD</b> 0	4710500407	75					
	: TZS 0	4710300463	31					
Swift Code	: NLCB	TZTX						
Branch	Branch : Sea Cliff - Private Banking							
Branch Code : 671547								
FOR OFFIC	IAL USE ONLY	<u>,</u>						
Serial No.	Receipt No.	Sponsor	Date Received	Selected	Not Selecte	∍d		
Sign : Date :  Deputy Accountable Manager								
				Official S	stamp			