



JOINING INSTRUCTION TO ORDINARY DIPLOMA

• BASIC REQUIREMENTS FOR SPECIFIC COURSES

1. CLINICAL MEDICINE

- Blood pressure machine
- Stethoscope
- 1 Thermometer
- 1 Examination torch
- 1 Tape measure Patellar Hammer
- 1 Patella Hammer
- 1 Cracking Board
- 1 Pen Torch

2. PHARMACEUTICAL SCIENCES

1. Calculator
2. Digital scale weighing Balance
3. Tanzania Pharmaceutical Handbook (TPH)

GENERAL REQUIREMENTS.

The Reporting Date to the College is October 2024 and the Beginning of Semester I For September Intake is

On arrival at **KILIMANJARO INSTITUTE OF HEALTH SCIENCES -ARUSHA**, report at the office of the Registrar with the following:

- Admission letter to **KILIMANJARO INSTITUTE OF HEALTH SCIENCES -ARUSHA**
- Copy of certified Certificates of secondary School Education
- Copy of Birth certificate/Affidavit
- Four recent colored passport size.

Warning:

It is criminal offence to submit **FALSE** information/Certificates.

COLLEGE UNIFORM

The college have a standard uniform dress, for Health and Allied Sciences, students **MUST** dress respectably at ALL times when they are at the college and when going out under the name of the college in other formal academic activities such as study tours, industrial /field/rotation or practical training etc.

NOTE:

ALL uniform are found at the college by paying **one hundred and twenty thousand (120,000/=) only.**

FEMALES

- Two white gown (With collar) **Note.** It must be at least thirty centimeters (30 cm) below knees (Decent one) Flat black shoes (Open shoes or sandals are not allowed at the college campus)
- Two white laboratory/Clinical coats (Long sleeves) **Note:** Jeans style is not allowed at the college campus.

MALES

- White shirts preferred short sleeves Khaki colored two pairs of trousers (Cotton materials) **Note:** Jeans style is not allowed at the college campus.
- Black leather shoes (Open shoes/ sandal are not allowed)
- Two white laboratory/ Clinical coats (Long sleeves)

REQUIREMENTS FOR HOSTEL STUDENTS.

- Mattress dimension (2.5*6)
- 1 pillow
- 1 blanket
- 2 bed sheets
- 1 mosquito net

REQUIREMENTS FOR PAYMENTS OF COLLEGE FEE AND OTHER CHARGES

Fees should be paid in FULL at the beginning of each academic year or in **FOUR installments.**

Fee once paid will not be refunded if a student withdraws or leaves the College without permission from the Principal or is disqualified in examination or dismissed for indiscipline.

Payment by cheque, International Money Orders (IMO) etc. is accepted prior to clearance by the bank. Payment by M-Pesa, Tigo Pesa, and Airtel Money is not accepted. **FEE** must be paid through the college Bank account.

COLLEGE FEE STRUCTURE FOR 2024/2025

All payments of COLLEGE fee shall be paid directly to College bank Account, at any branch of NMB Bank.

NMB Account Number: Number: **43910020431**

Name: **KILIMANJARO INSTITUTE OF HEALTH SCIENCES LIMITED**

Bring the bank pay in slips to the college WHEN arriving at the college.

TUITION FEE AND OTHER PAYMENT DESCRIPTION

ITEM	AMOUNT	RESPONSIBLE	PERIOD
COLLEGE FEE	1,400,000	ALL	Paid at once or in FOUR installments
OTHER CHARGERS	1,025,000	ALL	
TOTAL	2,425,000	ALL	Paid at once or in FOUR installments

Other Charges

IDENTITY card	10,000/-	ALL	Once at the begin of first semester
NACTE quality Assurance	15,000/-	ALL	Every year at the begin of the year
Local examination	300,000/-	ALL	Every year at the begin of first semester
Caution money	100,000/-	ALL	Once at the begin of first semester
White rim paper	2 pcs	ALL	Once at the begin of semester
Pre-NACTE Examination	100,000/-	ALL	Once at the begin of second semester
College Stationary	150,000/-	ALL	Every year at the begin of the year
Registration Fee	150,000/	ALL	At the begin of first semester
Maintenance Fee	200,000/	ALL	
Hostel	FREE		
TOTAL	1,025 ,000/=		

FIRST SEMESTER	AMOUNT	PERIOD
First installment	700,000	At the begin of 1 st semester when reporting
Second installment	512,500	Two months after opening the college
SUB TOTAL	1,212,500	

SECOND SEMESTER	AMOUNT	PERIOD
Third installment	700,000	At the begin of 2 nd semester when reporting
Fourth installment	512,500	Two months after opening the college
SUB TOTAL	1,212,500	
TOTAL	2,425,000	

OTHER PAYMENTS DEPENDING ON SPECIFIC COURSE/PROGRAM AND YEAR OF STUDY.

ITEM	AMOUNT	RESPONSIBLE	PERIOD
Clinical Rotation	200,000/-	All students with clinical rotations	Every semester with clinical rotations shall be paid one month before commencement of rotations
Pharmacy Practice/ Environmental Field	200,000/-	All students with field	Every year at the begin of the semester with Field
Supplementary/ Special Examination	50,000/-	Per module	
NACTE- Examination fee	150,000/-	ALL	At the begin of second semester
Health Insurance (NHIF)	60,000	ALL	At the begin of first semester

MEDICAL EXAMINATION FORM

PART I: PERSONAL PARTICULARS (To be filled by the candidate)

SURNAME AGE..... SEX

FIRST NAME.....

MIDDLE NAME.....

MARITAL STATUS

PART II-V (To be filled by a medically qualified and registered professional)

PART II: PERSONAL HISTORY

Are you suffering or have you suffered from any of the following? Indicate YES or NO. 1 Tuberculosis.

..... 11 Diabetes. 2 Asthma..... 12
Epilepsy.....
3 Rheumatic fever 13 Deformity.....
4 Allergic disorders 14 Mental Illness.....
5 Heart disease 15 Eye disorder.....
6 Gastric or duodenal ulcers 16 Ear, Nose or Throat Disorder.....
7 Jaundice..... 17 Skin disease
8 Dysentery 18 Anemia.....
9 Varicose veins. 19 Gynecological disorder.
10 Kidney disease. 20 Any other serious disorder (specify)

PART III : PHYSICAL EXAMINATION

1 Height (cm)..... 5 Ears (state if any discharge).....
2 Skin. 6 Mouth and throat.
3 Weight (Kg) 7 Nose.
4 Eyes 8 Any abnormality.....
Conjunctivae..... 9 Cardiovascular system:
Pupils..... Blood pressure: Systolic. Vision: Without glasses: Right
Diastolic.....
Left. Heart: Any Mummer?
With glasses: Right. Arteries and veins..... Left. 10 Respiratory system:
Lung fields

11 Abdomen.

PART IV: LABORATORY

1. Urine: 2. Stool: Special emphasis on Albumin
Hookworm or Schistosoma Sugar:
.....
Leucocytes
Schistosoma
3. Blood Examination: 4. X-ray examination – Chest (a) Hb level (Include Radiologist's report)
(b) Neutrophils (c) Eosinophils (d) Basophiles
..... (e) Lymphocytes (f) Monoocytes (g) ESR
.....
5. Serology: 6. Pregnancy test (Females) Widal Test
.....
VDRL

PART V: CONCLUSION

I have examined Mr./Miss/Mrs. and consider that He/she is physically and mentally fit / not fit to be admitted to the University for higher education.

Date: Signature Name: Title:

Qualifications: Official STAMP

Address:

'BRIDGE TO SUCCESS'

You are warmly welcome

PRINCIPAL

KILIMANJARO INSTITUTE OF HEALTH SCIENCES ARUSHA