



GOLD SEAL MEDICAL COLLEGE – SINGIDA (GSMC)

P.O.BOX 362, SINGIDA-TANZANIA

PHONE NUMBER: +255759311827

Website: www.gsmcs.ac.tz

Email: goldsealcollege@gmail.com

STUDENT APPLICATION FORM

(Please carefully read the Instructions before filling in this application form)

Academic Year for Which Admission is Sought (e.g., 2023/2024):

CHOICE OF CERTIFICATE & DIPLOMA PROGRAMMES

In the table below tick your choice according to your preference.

Attach three
colored
passport
size

Programme Name	Programme Duration	Choice of programme (tick ✓)
<i>E.g., Diploma in Pharmaceutical Sciences</i>	<i>Three years</i>	✓
Ordinary Diploma in Pharmaceutical Sciences	Three Years	
Technician Certificate in Pharmaceutical Sciences	Two Years	
Basic Technician Certificate in Pharmaceutical Sciences	One Year	
Ordinary Diploma in Clinical Medicine	Three Years	
Technician Certificate in Clinical Medicine	Two Years	
Basic Technician Certificate in Clinical Medicine	One Year	

Section 1: Application Details

(Please complete in BLOCK letters or typed)					
NAME	Surname		First Name		Middle Name
Nationality	Date of Birth		Place of Birth		
Secondary Education	Form IV Index No.		Year		
	Form VI Index No.		Year		
Schools Attended	Primary School				
	"O" Level				
	"A" Level				
Gender	Male		Marital Status	Single	
	Female			Married	
No. of Children					
Do you consider yourself to have a disability?	YES		Do you have a criminal conviction?	YES	
	NO			NO	
Permanent Home Address	City/Town		Address for Correspondence different from Home Address) (If	City/Town	
	Country			Country	
	Telephone			Telephone	
	Email			Email	
	Postal Address			Postal Address	

Section 2: Education Details (your qualifications must demonstrate eligibility for the course, completed in BLOCK letters or typed)

List all academic qualifications that you have achieved in “O-Level”, “A-Level” level grade or equivalent. Certified of all relevant certificate and transcripts must be attached with this application.

Qualification	From	To	School Name	Index no:	Grade / % Marks
E.g.-LEVEL	2015	2019	FAULU SECONDARY SCHOOL	S1528/0026	DIV. I-7

PREVIOUS COLLEGE DETAILS

College/ University name	From	To	COURSE STUDIED	AWARDED / GPA	NTA LEVEL

NTA LEVEL 4 OR 5 NACTE REGISTRATION NUMBER:

ADDRESS AND CONTACTS OF THE PREVIOUS COLLEGE

P O BOX:

TEL:

MOBILE:

FAX:

Email:

Section 3: Employment Details: (Important if you are applying as a mature age entry).

Please give details of positions held over the past 5 years, if you are applying as a mature – age or equivalent, provide detailed job descriptions on separate page and attach documentary evidence, e.g., reference letters from employers.

Employer name	Address	Position held	From	To

Section 4: Accommodation: (tick ✓ if you need accommodation) YES NO

All residents are required to sign an accommodation tenant agreement form /contract before allocated to the room. In a room you will find a bed, mattress, table, chair and keys.

Section 5: Finance

Indicate how you intend to finance your studies and your living expenses in Singida.

How will you finance your studies at GSMC? Family <input type="checkbox"/> Employer <input type="checkbox"/> Loan <input type="checkbox"/> Savings <input type="checkbox"/> Other <input type="checkbox"/>			
Parents/Guardians		Job Occupation	
Telephone No.		E-mail	
<p>Sponsor Declaration: I have agreed to finance the above named applicant in his/her studies at GSMC and to release funds for tuition fees and living expenses as and when required.</p> <p>Signed: _____ Name _____ Date: _____</p>			

Section 6: Referees

(Please completed in BLOCK letters or typed).

Please provide the names of two referees; at least one should be an academic referee who has knowledge of your academic ability.

Referee Name	Address	Telephone	E-mail

Section 7: Fee Structure

All payments shall be paid to GSMC Bank accounts at CRDB Bank or NMB Bank.

TUITION FEE: GSMC Tuition, Account No. 0150562017900 for CRDB / 50810045312 for NMB.

OTHER PAYMENTS: GSMC Miscellaneous, Account No. 0150562017900 for CRDB / 50810045312 for NMB.

- Bring bank pay - in slips to the college.
- The Tuition fee are payable in full or in four installments at the beginning and middle of each semester.
- Accommodation fee may be paid in full or in two installments at the beginning of every semester.
- Other payments are payable in full.

Note: All payments other than Tuition fees should be paid to the GSMC Miscellaneous Account number stated above

TUITION FEE	SEMISTER 1 (TSH)	SEMISTER 2 (TSH)	PER YEAR (TSH)
PHARMACEUTICAL SCIENCES	800,000	800,000	1,600,000/=
CLINICAL MEDICINE	800,000	800,000	1,600,000/=

Section 8: Mode of Application

Please attach the following with application form

1. bank pay - in slip that shows you have paid for admission fee
2. Certified copy of Birth Certificate
3. Certified copy of Academic certificates and Transcript
4. Four colored passport size photos

Note: SCAN IN ONE PDF AND THEN SEND THEM THROUGH WHATSAPP BY USING THIS NO: 0759311827. OR SEND THEM THROUGH EMAIL: admission@gsmcs.ac.tz OR IF YOU ARE NEARBY OUR COLLEGE, YOU CAN DELIVER THIS FORM DIRECT TO OUR COLLEGE. Non-Refundable Application Fee Of 30,000/= Should Paid Through the Bank and Submit the Pay-In- Slip, Account number **50810045312 for NMB** / **0150562017900 for CRDB** Name of account GOLD SEAL MEDICAL COLLEGE.

Application should be sent directly to the College Principal, (GSMC)

P. O. Box 362,

Singida

Mob: +255 759311827

Website: www.gsmcs.ac.tz

Section 9: DECLARATION

I, certify that the given above information is correct to the best of my knowledge and I accept that I will be accountable for any false information given.

SIGNATURE.....

DATE:/...../.....