

TANZANIA COMMISSION FOR UNIVERSITIES



PRIOR-ADMISSION CLEARANCE FORM 2019/2020

(This form is specifically for applicants who were previously admitted and wishes to apply for new admission. Therefore applicants are advised to follow the application procedures to apply for new admission)

(With this form please *attach a confirmation/clearance letter from the previously selected/admitted Institution*)

A. PERSONAL RECORDS:

1. Full Name:
2. Form Four (IV) Index Number:Year.....
3. Form Six (VI) Index Number:Year.....
4. Name of Programme Selected:
5. Name of Institution Selected:
6. Academic Year:
7. Email address:
8. Telephone/Mobile Number:
9. Reason:
Discontinuation Health Problems Financial Problems
Other (please specify)

Name Signature Date.....

B. APPROVAL DECISION (To be completed by the authorizing officer)

- a) I approve / deny the above request
- b) If denied give reasons

Name Signature

Designation Date20.....