## $(Regulation\ 25(3))$

## APPLICATION FOR GRANT OR APPROVAL OF CHARTER

## Important Notice:

- a. This form must be filled by the Institution wishing to apply for grant or approval of Charter;
- b. In the course of completing this form, the applicant is required to make reference to sample of Charters and check-lists as may be issued from time to time by the Commission.

## PART I DETAILS OF THE INSTITUTION PROPOSED FOR CHARTERING OR APPROVAL OF CHARTER

1. 2.	Catego	of the institution:  ry of the institution (university/college/institute/centre/directorate/other (please specify)):
3.	Type of	f the institution (public/private/Public Private Partnership (PPP))
4.	Particular (a) Photo (b) Pool (c) Pool (d) Te (e) Moto (f) Fac (g) En	lars of the institution:- ysical address of the institution: stal address of the institution: stal Code: lephone Numbers: obile Number: x Number: nail Address:
5.	Date th	e institution was granted Provisional License (PL) :/20
		PART II CHARTER COMPLIANCE WITH THE LAW
and	l confirment (a) (b)	
	(c) (d) (e) (f) (g) (h) (i) (j) (k) (l) (m) (n) (o)	Compliance with Institutional Strategic Plan; Alignment with National Development Goals and Objectives of higher education; Governance; Administration and management; Appointments of staff; Staff of the Institutions; Students administration and welfare; Staff and students disciplinary matters; Planning, Budgeting, Resource Management; Staff associations; Students' organizations; Convocations and alumni associations; Political activities prohibitions;
	(p)	Periodic Reports;

Amendments of charter;

Rights of staff and students; and

Matters related to dissolutions of the institution;

Overall compliance with good governance provisions.

(q)

(r)

(s)

(t)

6.	6. Declaration I declare that the information provided above is true to the best of my own knowledge			
	Name:			
	Title:			
	Signature:			
	Date/	Official Stamp or Seal		
		-		
FOR OFFICIAL USE ONLY				
Fees paid				
(ii)	Receipt No Dated	<i>1/</i>		
(NB. All payments to be made through bank in favour of the Tanzania Commission for Universities)				
		D.		
Na	me: Signature:	Date:		
(i) Bank draft / Pay order No				