



# KOLOWA TECHNICAL TRAINING INSTITUTE KOTETI

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## APPLICATION FORM FOR ADMISSION TO CERTIFICATE AND DIPLOMA IN LAW PROGRAMME FOR ACADEMIC YEAR 2025/2026

Fill this form application form in in block letters (Handwritten/Typed letter) and thereafter submit to;  
**The Principal,  
Kolowa Technical Training Institute,  
P. O. Box 370, Lushoto, Tanzania.**

OR submit it through email address [adm@koteti.ac.tz](mailto:adm@koteti.ac.tz).

While making Application the Applicant should pay a non refundable fee of ten thousand shillings

(TShs.20,000) through **CRDB Bank Account Number 0150674824400, name:Kolowa Technical Training Institute** and attach the copy of the Bank Pay-in- Slip in this application form upon submission to Kolowa Technical Training Institute. Application forms which have not been attached with pay-in-Slip shall not be received and processed.

**Applicants must attach Photocopy of:**

- Advanced Certificate of Secondary Education Examinations (ACSEE) or Certificate of Secondary Education Examinations (CSEE).

### ADMISSION REQUIREMENTS:

**NOTE:**An Applicant has to put **TICK** for the **NTA Level** He/She is applying

#### **A. NTA Level 4 is open to holders of:**

Form IV certificate with a minimum of **D** grade in four subjects including English(excluding religious subjects) in the certificate of Secondary School Examinations

PASSPORT SIZE

**B. The Technician certificate (NTA Level 5) is open to holders of:**  
Basic Technician Certificate in Law (NTA Level 4)

**C. The Ordinary Diploma (NTA Level 6) is open to holders of:**  
Technician certificate in Law (NTA Level 5).

|   |                                       |                      |
|---|---------------------------------------|----------------------|
| <b>THIS IS AN APPLICANT'S PARTICULARS FORM FOR ALL LEVELS</b> |                                       |                      |
| <b>WRITE PARENT'S/GUARDIAN'S PHONE NUMBER HERE:.....</b>      |                                       |                      |
| <b>BASIC PARTICULARS OF THE APPLICANT:</b>                    |                                       |                      |
| <b>First Name*</b>  | <b>Middle Name</b>                    | <b>Surname</b>       |
|   |                                       |                      |
| <b>Date of Birth*</b>   | <b>Physical disabilities (if any)</b> | <b>Gender*</b>       |
|   |                                       |                      |
| <b>PRIMARY SCHOOL WHICH THE APPLICANT ATTENDED</b>            |                                       |                      |
| <b>YEAR OF COMPLETING PRIMARY SCHOOL:</b>                     |                                       |                      |
| <b>NAME OF PRIMARY SCHOOL</b>                                 | <b>DISTRICT</b>                       | <b>REGION</b>        |
|   |                                       |                      |
| <b>FORM IV INDEX NUMBER:</b>                                  |                                       |                      |
| <b>CONTACT DETAILS:</b>                                       |                                       |                      |
| <b>Postal Address*</b>  | <b>Email Address*</b>                 | <b>Phone Number*</b> |
|   |                                       |                      |
| <b>Country*</b>   | <b>Region</b>                         | <b>District</b>      |
|   |                                       |                      |
| <b>APPLICANT'S NEXT OF KIN/GUARDIAN:</b>                      |                                       |                      |
| <b>Full Name*</b>   | <b>Postal Address*</b>                | <b>Phone Number*</b> |
|   |                                       |                      |
| <b>Relation*</b>  | <b>Email Address*</b>                 | <b>Region*</b>       |
|   |                                       |                      |
| <b>APPLICANT'S SIGNATURE:</b>                                 |                                       |                      |

