



## APPLICATION FOR ADMISSION

**F1 – FT MBA**

### UNIVERSITY OF DAR ES SALAAM BUSINESS SCHOOL

#### MASTER OF FINANCE AND ACCOUNTING IN OIL AND GAS (MFA-OG)

This application form is also available on the World Wide Web at <http://www.udbs.udsm.ac.tz>

#### CHECKLIST

Read **ALL** the instructions carefully

Complete this form and **sign it**

#### Attachments:

- ☐ Three letters of recommendations (sealed and signed)
- ☐ Secondary School Certificates
- ☐ Diploma / Advanced Diploma / Degree Academic Transcripts and
- ☐ CV detailing employment and self-employment experience
- ☐ Brief Statement of Purpose for pursuing the Master Degree (1 page maximum)
- ☐ One passport-size photos (with name written at the back)

Affix your  
passport-size  
photo here

For Official use only

Received on \_\_\_\_\_

Admitted  
[FHDC]

Yes      No  
[   ]    [   ]

Submit the application form, attachments and **Tshs 50,000/=** application fee receipt,  
\$50 for Foreigners

#### PLEASE RETURN TO:

#### MBA FULL TIME

Bank Name: **NBC Ltd.**

Bank Branch: UDSM Branch

Account Name: UDSM Department of  
Accountancy

Account Number: **040103000791**

**Head, Department of Finance  
MFA -OG Programme  
University of Dar es Salaam Business School  
P. O. Box 35046  
Dar es Salaam**

**Tel.:** +255 22 2410257, +255 714 886 882

**Fax:** +255 22 2410510

**E-Mail:** [udbsfinance@gmail.com](mailto:udbsfinance@gmail.com), [uhasibu@udbs.udsm.ac.tz](mailto:uhasibu@udbs.udsm.ac.tz)

**Website:** [www.udbs.udsm.ac.tz](http://www.udbs.udsm.ac.tz)

#### **Physical Address:**

**University of Dar es Salaam (Main Campus - Mlimani)  
UDBS Building 3<sup>rd</sup> Floor, Room 411**

The *University of Dar es Salaam Business School* provides a secure but challenging environment within which graduate students are trained and encouraged to pursue academic excellence. Please take the trouble to complete this form carefully and fully. The personal information collected on or in conjunction with this form is required to determine your eligibility for admission and will be used to contact you regarding University programs and services. It will form part of your record as an applicant, student and alumnus. We look forward to receiving your application.

## Biographical Information

Surname/Family Name			Other Name(s)	
Title (Mr/Mrs/Miss/Ms) <input type="checkbox"/> <input type="checkbox"/>	Date of Birth	Country of Birth	Nationality	Disabilities/Special needs Yes <input type="checkbox"/> No <input type="checkbox"/>
Permanent Address				Nature of Disability /special need (if any)
Telephone Number • Landline • Mobile		Fax Number		E-mail Address

## Employment Record

Institution (Current Employer)	Position	From:	To:
Nature of Work (Responsibilities)			

## Academic Information

Highest Academic Qualifications Attained	Institution	Year of Graduation
Specialisation		Undergraduate/Advanced Diploma GPA
Other Academic or Professional Qualifications		

## Referees

Please give the names and addresses of two persons who are acquainted with your academic or professional work and enclose their letters of recommendation with this application confirming you have done so by ticking the appropriate boxes.

<b>Name</b>          Recommendation enclosed <input type="checkbox"/>	<b>Address</b>          
<b>Name</b>          Recommendation enclosed <input type="checkbox"/>	<b>Address</b>          
<b>Name</b>          Recommendation enclosed <input type="checkbox"/>	<b>Address</b>          

## Financial Support

How do you intend to finance your studies?

<b>Self</b> <input type="checkbox"/>	<b>Employer</b> <input type="checkbox"/>	<b>Other(s) Specify</b> <input type="checkbox"/>
<b>Name and Address of your Financial Sponsor (if applicable)</b>	<b>Name</b>	<b>Address</b>

## Additional Information

How did you find out about the Programme at the University of Dar es Salaam?  
Please tick all that applies.

<input type="checkbox"/> Prospectus	<input type="checkbox"/> Education/Trade Fair	<input type="checkbox"/> World Wide Web
<input type="checkbox"/> Advert in Newspaper/Journal	<input type="checkbox"/> University/College Careers Service	<input type="checkbox"/> Personal Recommendation
Other (please specify) ..... *please specify publication where possible .....		

## Declaration

I certify that the information given in this application and in the supporting documents is accurate and complete. I understand that the submission of inaccurate information may be sufficient cause for refusal of admission or termination of registration.

<b>Signature</b>          	<b>Date</b>          
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## RECOMMENDATION FORM (1)

### MASTER OF FINANCE AND ACCOUNTING IN OIL AND GAS (MFA-OG)

<b>Applicant</b>	Please complete this section. Give this form to the person who will act as your referee. Return your application form with a sealed letter of recommendation	
<b>Surname/Family Name</b>	<b>Other Name(s)</b>	
<b>Applicant's Signature</b>	<b>Date</b>	

<b>Referee</b>	To enable us assess the candidate's suitability for the Programme, we kindly request that you evaluate the candidate in the areas indicated in the table below (Tick the appropriate cell). Please indicate the applicant's qualifications and potential to undertake advanced study/research. Describe the applicant's motivation and intellect and Indicate both strong and weak points. Please write frankly. If the applicant's first language is not English, please comment on his/her ability to read, write and speak English.				
How long have you known the Applicant?					
In what capacity?					
	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>	<b>Very Poor</b>
<b>Intellectual Ability</b>					
<b>Capacity for Original Thinking</b>					
<b>Maturity</b>					
<b>Motivation for Postgraduate Studies</b>					
<b>English Language Proficiency</b>	<b>Written:</b>				
	<b>Oral:</b>				
<b>Ability to work with others</b>					
<b>Other capabilities/talents worth mentioning:</b>					
<b>What do you consider to be the Applicant's weaknesses?</b>					
<b>What is your recommendation on the suitability of the applicant to the applied Programme?</b>					
<b>Give any other additional comments that you consider relevant about the applicant.</b>					

<b>Referee's Name and Contacts</b>		
<b>Name</b>	<b>Title (Dr/Prof/ Mr./ Mrs./ Miss/ Ms)</b>	
<b>Institution</b>		<b>Position</b>
<b>Postal Address</b>	<b>Telephone (Landline)</b>	<b>Mobile</b>
<b>Fax</b>	<b>E-mail</b>	
<b>Referee's Signature</b>		<b>Date</b>

Please enclose the completed form in a sealed envelope and sign it across the seal. Return the envelope to the applicant, who will forward it with his/her application to:

Head, Department of Finance  
P. O. Box 35046, Dar es Salaam.

**Telephone:** 255 22 2410257 or Mobile No. 255 714 886 882; Fax: +255 22 2410510

[udbsfinance@gmail.com](mailto:udbsfinance@gmail.com), [uhasibu@udbs.udsm.ac.tz](mailto:uhasibu@udbs.udsm.ac.tz)

Website: [www.udbs.udsm.ac.tz](http://www.udbs.udsm.ac.tz)

Physical Address:

University of Dar es Salaam (Main Campus - Mlimani)  
UDBS Building 2<sup>nd</sup> Floor, Room 303A

## RECOMMENDATION FORM (2)

### MASTER OF FINANCE AND ACCOUNTING IN OIL AND GAS (MFA-OG)

PLEASE TYPE OR USE BLOCK CAPITALS IN BLACK INK AND WRITE INSIDE THE BOXES

#### Applicant

Please complete this section. Give this form to the person who will act as your referee. Return your application form with a sealed letter of recommendation

Surname/Family Name

Other Name(s)

Applicant's Signature

Date

#### Referee

To enable us assess the candidate's suitability for the Programme, we kindly request that you evaluate the candidate in the areas indicated in the table below (Tick the appropriate cell). Please indicate the applicant's qualifications and potential to undertake advanced study/research. Describe the applicant's motivation and intellect and Indicate both strong and weak points. Please write frankly. If the applicant's first language is not English, please comment on his/her ability to read, write and speak English.

How long have you known the Applicant?

In what capacity?

		Excellent	Good	Average	Poor	Very Poor
Intellectual Ability						
Capacity for Original Thinking						
Maturity						
Motivation for Postgraduate Studies						
English Language Proficiency	Written:					
	Oral:					
Ability to work with others						

Other capabilities/talents worth mentioning:

What do you consider to be the Applicant's weaknesses?

What is your recommendation on the suitability of the applicant to the applied Programme?

Give any other additional comments that you consider relevant about the applicant.

<b>Referee's Name and Contacts</b>		
<b>Name</b>	<b>Title (Dr/Prof/ Mr./ Mrs./ Miss/ Ms)</b>	
<b>Institution</b>		<b>Position</b>
<b>Postal Address</b>	<b>Telephone (Landline)</b>	<b>Mobile</b>
<b>Fax</b>	<b>E-mail</b>	
<b>Referee's Signature</b>		<b>Date</b>

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## RECOMMENDATION FORM (3)

### MASTER OF FINANCE AND ACCOUNTING IN OIL AND GAS (MFA-OG)

PLEASE TYPE OR USE BLOCK CAPITALS IN BLACK INK AND WRITE INSIDE THE BOXES

<b>Applicant</b>	Please complete this section. Give this form to the person who will act as your referee. Return your application form with a sealed letter of recommendation	
<b>Surname/Family Name</b>	<b>Other Name(s)</b>	
<b>Applicant's Signature</b>	<b>Date</b>	

<b>Referee</b>	To enable us assess the candidate's suitability for the Programme, we kindly request that you evaluate the candidate in the areas indicated in the table below (Tick the appropriate cell). Please indicate the applicant's qualifications and potential to undertake advanced study/research. Describe the applicant's motivation and intellect and Indicate both strong and weak points. Please write frankly. If the applicant's first language is not English, please comment on his/her ability to read, write and speak English.				
How long have you known the Applicant?					
In what capacity?					
	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Poor</b>	<b>Very Poor</b>
<b>Intellectual Ability</b>					
<b>Capacity for Original Thinking</b>					
<b>Maturity</b>					
<b>Motivation for Postgraduate Studies</b>					
<b>English Language Proficiency</b>	<b>Written:</b>				
	<b>Oral:</b>				
<b>Ability to work with others</b>					
<b>Other capabilities/talents worth mentioning:</b>					
<b>What do you consider to be the Applicant's weaknesses?</b>					
<b>What is your recommendation on the suitability of the applicant to the applied Programme?</b>					
<b>Give any other additional comments that you consider relevant about the applicant.</b>					



<b>Referee's Name and Contacts</b>		
<b>Name</b>	<b>Title (Dr/Prof/ Mr./ Mrs./ Miss/ Ms)</b>	
<b>Institution</b>		<b>Position</b>
<b>Postal Address</b>	<b>Telephone (Landline)</b>	<b>Postal Address</b>
<b>Fax</b>	<b>E-mail</b>	
<b>Referee's Signature</b>		

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