



MCHUKWI INSTITUTE OF HEALTH AND ALLIED SCIENCES

S.L.P 24. KIBITI- PWANI.

SIMU: +255 657973751/+2557130855533

Barua pepe: mchukwinursingschool@gmail.com

Mchukwihealthinstitute@gmail.com

Tovuti: www.mchihas.ac.tz



JOINING INSTRUCTION FOR ACADEMIC YEAR 2024/2025 ADMISSION TO ORDINARY DIPLOMA IN NURSING AND MIDWIFERY,

Dear Selected Student.

I am glad to inform you that you have been selected to join Mchukwi institute of health and allied sciences (MCHI HAS) on this academic year 2024/2025, Mchukwi institute of health and allied sciences is a Faith Based organization (FBO) fully registered by NACTE with Reg. No. REG/HAS/136. The institute admits all students regardless of their faith, however all students are required to adhere to our rules and regulations.

LOCATION

MCHI HAS is located about 150km south of Dar es Salaam, 8km off Kilwa road; it is within Kibiti District, at Mchukwi Ward. Coming from Dar by public transport your journey will be starting at Mbagala rangi tatu bus terminal and drop at Kibiti town or at Mchukwi Mission Hospital junction (the junction is also known as njia panda ya Songa) where you will find a transport which will take you to Mchukwi Mission Hospital where the institute is located.

1. DATE OF ARRIVAL AND REGISTRATION

- I. Registration and orientation will commence on **9th to 15th OCTOBER, 2024** from **8:00am -4:00 pm**.
- II. Failure to **report within two weeks** from commencement of registration date (i.e. 9th to 15th October, 2024) will lead to deregistration.
- III. All students are required to participate fully in the orientation program.

SECTION A: REQUEREMENTS

You are required to present yourself to the Admission Officer of our Institution for registration formalities after payment of the prescribed fees.

Make sure on admission you have the following:

- ✦ Academic Secondary School certificate (CSEE)
- ✦ Admission letter
- ✦ Birth certificate/ Affidavit
- ✦ Joining instruction
- ✦ Filled medical examination form

- ✦ Transcript /Recommendation letter/Certificate of council (For upgrading NTA level 6)
- ✦ Two (2) recent coloured passport size
- ✦ Copy of National Identification card or NIDA number

REQUIREMENTS ORDINARY DIPLOMA IN NURSING AND MIDWIFERY

✦ **Student learning kit**

(Blood pressure machine, stethoscope, thermometer, tape measure, tourniquet, patella hammer, otoscope, turning fork and pen torch)

✦ **Nurse watch**

- ✦ 2 boxes of non- sterile gloves and 1 box of surgical per year
- ✦ One ream A4 at every beginning of a new semester

BOARDING AND UNIFORMS

The college provides full boarding accommodation and uniforms for all students. The student(s) must bring:

- ✦ 2 bed sheets and 1 pillow
- ✦ A mosquito net – square in shape (ft 3/6).
- ✦ White sweater (Round collar with no zip and buttons)
- ✦ Two pairs of black leather Shoes – closed with flat or low heels, and three pairs of white socks for both females and males.
- ✦ Sports clothes –Truck suit.
- ✦ Sports shoes

REQUIREMENTS FOR PAYMENYS OF SCHOOL FEES AND OTHER CHARGES

- ✦ School fees should be paid **in full** at the beginning of each academic year **in Four instalments.**
- ✦ Fees once paid will not be refunded if a student withdraws or leaves the College without permission from the Principal or is disqualified in examination or dismissed for indiscipline.
- ✦ The bank original pay-in-slip should be submitted to the college accountant or cashier for receipt/acknowledgement.

NOTE: We strongly advise parents/guardians to pay through bank accounts and give the students a pay in slip

SECTION B: SPIRITUAL LIFE

MCHIHAS is a Christian institution where students have freedom of worship in their denominations. All students are requiring following the college regulations regarding spiritual life.

SECTION C: DRESS CODE

Students are required to dress with decency, modesty and smartness. Tight or transparent clothes, stomach-cuts, earrings for men, trouser which is so tight and/or loosely hanging below the waist for men are strictly not allowed before, during and after class hours, whether on-campus or off-campus.

Casual wears like khangas, shorts, sport shoes, skin tights, dress which does not cover sensitive parts of the body above knees, stomach, chest, waist are not allowed around academic areas and administration block.

Hair dressing is allowed for females by normal style 5-7 lines (Twende kilioni)

SECTION D: FEE STRUCTURE

**MCHUKWI INSTITUTE OF HEALTH AND ALLIED SCIENCES
P.O.BOX 24
KIBITI.**

**PART ONE: SCHOOL FEES ACADEMIC YEAR 2024/2025
FEE STRUCTURE FOR ORDINARY DIPLOMA IN NURSING AND
MIDWIFERY PROGRAMME.**

ITEM	FIRST YEAR	SECOND YEAR	THIRD YEAR	INSERVICE
TUITION FEE	1,150,000	1,150,000	1,150,000	1,150,000
EXAMINATION FEE	300,000	300,000	300,000	300,000
ID FEE	10,000			10,000
PRACTICAL BOOKS	15,000	25,000		30,000
MAINTANANCE FEE	55,000	55,000	55,000	55,000
TREATMENT COST				
QUALITY ASSURANCE NACTE	15,000	15,000	15,000	15,000
UNIFORM	120,000		40,000	60,000
ACCOMODATION	150,000	150,000	150,000	150,000
COMM FIED WORK		120,000		
RESEARCH			120,000	120,000
FIELD (CANCER & MENTAL)			135,000	135,000
GRADUATION	30000	30000	30000	30000
STUDENT UNION	5,000	5,000	5,000	5,000
TOTAL	1,850,000	1,850,000	2,000,000	2,060,000

PART TWO: OTHER COSTS NOT DIRECTLY PAID TO INSTITUTE.

- **Treatment fee**, for non-NHIF members are advised to bring **50,400/=** for facilitation of health insurance modalities which will be paid annually
- **Qualifying examination fee**: There will be **end of semester II qualifying examination** which is conducted by Ministry of Health, students are required to pay **Tsh. 150,000/=** at the beginning of second semester each year.

PART THREE: SCHEDULE FOR PAYMENTS OF INSTITUTE FEE.

Installment	Date	First & second year students	Third year students	In-services students
1st Installment	16 th October 2024	650,000/=	700,000/=	760,000/=
2nd Installment	04 th January 2025	500,000/=	600,000/=	600,000/=
3RD Installment	02 nd March 2025	400,000/=	400,000/=	400,000/=
4th Installment	1 st July 2025	300,000/=	300,000/=	300,000/=
Total		1,850,000	2,000,000	2,060,000

Bank details:

Name: NMB Acc. No. **21310004032**,

Account name: FPCT- MCHUKWI INSTITUTE OF HEALTH AND ALLIED SCIENCES

Malsel D. Silyaki



PRINCIPAL





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STUDENT'S MEDICAL EXAMINATION FORM

(Should be filled in District, Regional or Referral Hospital)

NAME OF THE STUDENT (in full)

.....

Nationality.....Age.....Sex.....Marital Status.....

PERSONAL HISTORY

Has examine suffered from any of the following? If yes indicate data and diagnosis. If not please write "NO" in appropriate space.

- a) Tuberculosis
.....
- b) Cardiac Disease
.....
- c) Syphilis or Gonorrhoea
.....
- d) Allergies
.....

PHYSICAL EXAMINATION

- 1. Height
Weight.....
- 2. Chest – Lungs
Heart.....
BP
- 3. Abdomen
Organs
Pregnancy

- 4. Skin disease.....
- 5. Eyes: Conjunctive
- 6. Pupils
- 7. Ears, Nose, Throat

LAB INVESTIGATIONS

a) ESR WBC B/S Hgb..... Stool Urine

.....

b) S.T.I.....

c) Blood group

Any Physical challenges of the Prospective student plus the Doctors remarks

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DOCTOR'S RECOMMENDATIONS:

I have examined Mr./Mrs./Missand considered that he/she is FIT/NOT fit to be enrolled as a student at Mchukwi Institute of Health and Allied Sciences.

Name of the Doctor.....

Qualifications

(Official Stamp)

Signature..... Date:

SPONSOR DETAILS

Name of Student.....

Course.....

Year of Study.....

Nature of Sponsorship: Private Organization Other

Sponsor Duration:(Months/Year)

Name of Sponsor.....

Organization.....

Phone No.....Email.....

Signature of Sponsor.....Date.....

STAMP:

