

THE UNITED REPUBLIC OF TANZANIA  
MINISTRY OF LIVESTOCK AND FISHERIES



**VETERINARY COUNCIL OF TANZANIA**

**NOTICE FOR QUALIFYING EXAMINATION FOR ENROLMENT OF  
VETERINARY PARAPROFESSIONALS TO BE HELD ON 16<sup>TH</sup> AND  
17<sup>TH</sup> OCTOBER 2018**

Pursuant to Section 5(2)(I) of The Veterinary Act (CAP 319); Regulation 7(2) of The Veterinary (Procedures for Registration Examinations for Veterinarians and Veterinary Specialist), 2005 and The Veterinary (Procedures for Registration Examinations for Veterinarians and Veterinary Specialist), (Amendment) Regulations, 2016, The Veterinary Council of Tanzania is notifying Veterinary Paraprofessionals who wish to be enrolled as Paraprofessionals, that the Qualifying Examination for Enrolment of Veterinary Paraprofessionals shall be held on 16<sup>th</sup> and 17<sup>th</sup> October 2018 at the following venues in Mainland Tanzania:

1. College of Veterinary Medicine and Biomedical Sciences (SUA), Morogoro;
2. Tanzania Veterinary Laboratory Agency, Temeke, DSM;
3. Livestock Training Institute (LITA) Mpwapwa; and
4. Mwalimu Julius Nyerere, University of Agriculture and Technology Butiama, Musoma.

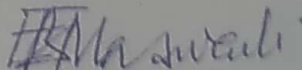
Candidates applying for qualifying examination must have a Diploma in Animal Health and Production offered by training institutions accredited by The National Accreditation Council for Technical Education (NACTE) and recognized by the Veterinary Council of Tanzania.

Candidates must fill application forms, pay an examination fee of 25,000/- as per Veterinary Council (Fees and charges), Regulations, 2015 and submit to the address below.

Examination fees must be paid two weeks before the dates of the examination to the Registrar, Veterinary Council of Tanzania, NMB Bank Account No. 20101100224. The Bank payment slip together with the application form must be submitted to this address.

Registrar  
Veterinary Council of Tanzania.  
NBC Building,  
Nyerere Road,  
P.O Box 2870.  
40487 Dodoma.  
Email: [bedan.masuruli@mifugo.go.tz](mailto:bedan.masuruli@mifugo.go.tz)

The application form is attached and must be filled by the would be candidates.

  
Dr B. Masuruli

REGISTRAR

05, September, 2018

# APPLICATION FORM FOR QUALIFYING EXAMINATION

Attach your signed

Stamped passport

Photograph here.

## SECTION A: PERSONAL DATA

Surname \_\_\_\_\_ Middle name \_\_\_\_\_ Other names \_\_\_\_\_

Marital status \_\_\_\_\_

Place of birth \_\_\_\_\_ Birth date \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ e-mail \_\_\_\_\_

## SECTION B: ACADEMIC QUALIFICATIONS

Diploma \_\_\_\_\_

Institution: \_\_\_\_\_

Date: \_\_\_\_\_

## SECTION C: APPLICANTS STATUTORY DECLARATIONS

I \_\_\_\_\_ do hereby declare on this \_\_\_\_\_ day  
of \_\_\_\_\_ that I am the person who is applying for qualifying examination as a Paraprofessional and I am  
holding the above qualifications and that the information I have given is true and correct to the best of my  
knowledge and belief.

Signature \_\_\_\_\_ Date \_\_\_\_\_