



CSI MIDWIFERY SHORT COURSE APPLICATION FORM

Childbirth Survival International (CSI) Tanzania
P.O. Box 25326, Ilala, Dar es salaam
Tel: 0754 432584 or 0745807205 or 0652156355
Email: csi-tz@childbirthsurvivalinternational.org
Stella Mpanda: stella.mpanda@childbirthsurvivalinternational.org or mpandas@yahoo.com

INSTRUCTIONS

Please complete this form in BLOCK LETTERS. Confirmation of enrollment will be communicated once the application has been approved. Incomplete information can lead to unnecessary delays in the processing of applications. Please submit the following documents with the completed application form: **copy of your midwifery license** and **bank receipt for paid registration**.

Documents can be:

1. E-mailed to csi-tz@childbirthsurvivalinternational.org and mpandas@yahoo.com
2. Mailed to Childbirth Survival International, P.O. Box 25326, Ilala, Dar es Salaam, Tanzania
3. Dropped off at the CSI Tanzania Office in Mazizini, Ukonga.

Include a nonrefundable registration fee: 15,000Tsh with your application.

SECTION A: MIDWIFERY SHORT COURSE INFORMATION

- PRIVATE APPLICATION (The applicant is responsible for payment)
 ORGANISATIONAL APPLICATION (The applicant is nominated and sponsored by an employer or other funder)

Short course name: CSI Midwifery Skills **Start date:** _____

***PLEASE NOTE:** booking is on a first paid first accepted basis and is subject to the availability of seats.

SECTION B: APPLICANT'S IDENTIFICATION INFORMATION

Full name:*As in ID

First _____ Middle _____ Surname: _____

Maiden name and/or previous surname (if applicable): _____

Your organization/institution name: _____

Position held: _____

How many years in this position? _____

Identification:

National identification number or Election card number or passport number: _____

Date of birth: Day _____ Month _____ Year _____

Gender (Check Male Female

E-mail address: _____

Do you have a disability? Please check Yes No

Nature of your disability: _____

List medications you are taking medications for your disability: _____

Will your disability affect your ability to successfully complete the midwifery professional development short course? Yes No

Contact numbers and Telephone numbers:

Work phone: _____ Personal phone: _____

Fax: _____ E-mail address: _____

Other phone numbers: _____

Postal address: ***This is the address to which all correspondences will be made, please make sure it is correct.**

Please list emergency contact:

Name: _____

Telephone: _____

Email: _____

TERTIARY QUALIFICATIONS

Please note: The short course is for licensed midwives registered in Tanzania. Hence this is the requirement for entry. It is the responsibility of the applicant to ensure that he/she meets the minimum requirement for the course. CSI reserves the right to request proof of conformity to any minimum requirements. Applicants are requested to supply full details of their studies at professional education institution(s). (For application purposes, the following are regarded as higher education institutions: universities, previous technical colleges.) Please provide the full names of professional education completed (no abbreviations). Award/Qualification e.g. Degree, diploma, certificate, field of study (e.g. Nursing/Midwifery Diploma, Nursing and Midwifery Certificate, BSc Nursing/Midwifery, MSc Nursing/Midwifery), name of institute, and year obtained the Qualification/Certificate.

Professional Education

Degree/Diploma/Certificate	Name of the Institute	Year

*I, _____ declare that all the information furnished by me on this form is true and correct. I hereby acknowledge and accept all terms and conditions.

Signature of applicant: _____ Date: _____

For Sponsored Applicants:

Sponsoring Organization: _____

Contact Name: _____

Signature of the Sponsoring Organization Responsible Person: _____

RETURN PAGES 1-3 ONLY TO ABOVE ADDRESS.

IMPORTANT INFORMATION TO THE COURSE

Childbirth Survival International (CSI)

P.O. Box 25326. Ilala. Dar es Salaam

Tel: 0754 432584 or 0745807205

Email: csi-tz@childbirthsurvivalinternational.org

Stella Mpanda: stella.mpanda@childbirthsurvivalinternational.org or mpandas@yahoo.com

1. ITEMS INCLUDED IN THE QUOTED FEE

Quoted fees are inclusive of course tuition, course material, refreshments, lunches, assessment and a certificate of successful completion, or a letter of attendance, as applicable.

2. TERMS OF APPLICATION FOR AND ACCEPTANCE INTO A COURSE

All prospective candidates must complete and submit an application form. Applicants will indicate on the application form the identity and contact information of the person who will be responsible for payment. Self-employed applicants shall sign a declaration confirming their acceptance of the conditions of payment. All applications will be supported by a copy of the registration and license by the Tanzania Nursing and Midwifery Council. Only candidates who satisfy all the course acceptance requirements, as applicable, will be permitted to attend a Continuous Professional Development (CPD) course. Course entrance requirements are published on the CSI website (www.childbirthsurvivalinternational.org). It is the responsibility of all candidate applicants to familiarize themselves with the applicable entrance requirements. Successful applicants will be registered on the CSI CPD short-course database. Successful applicants will be informed in writing of acceptance into and registration for a course. Please note that an application for acceptance into a course does not guarantee access to any other course offered by CSI. CSI will decline or accept all applications in writing. Limited seats are available per course. The decision to accept qualifying candidates into any course is made on a first come first accepted basis.

3. PAYMENT AND TERMS OF PAYMENT

- 3.1. Application fee is 15,000/= non-refundable for each applicant to the course. Your application will be considered after the payment of application fee.
- 3.2. The short course fee is Tsh. 500,000 which includes Tuition 300,000/=, clinical attachment and preceptorship 80,000/= refreshments and lunches 100,000/=, course material 10,000, assessment and a certificate of successful completion 10,000/=, or a letter of attendance.
- 3.3. Invoices are generated and forwarded to the applicant for payment once a completed course application form has been submitted to and accepted by CSI. Payment of the invoiced amount must be made within thirty (30) days of the invoice date and must be banked to Tanzania Women's Bank PLC, Account name: Childbirth Survival International (CSI); Account number 0350010459911. Dar es Salaam.

4. CANCELLATIONS OR POSTPONEMENTS

4.1 Notice of cancellations or postponements by registered candidates must be submitted in writing to CSI. Failure to do so in a timely manner will result in the following penalties:

- Written cancellation or postponements received by CSI more than ten 10 days before the commencement of the course. No cancellation fee.
- Written cancellation or postponements received by CSI less than ten 10 days before the commencement of any course: Cancellation fee of 20% payable.

- Written cancellation or postponements received by CSI less than five (5) days before the commencement of any course: Cancellation fee equal to the course fee.
- No written cancellation or postponement received by CSI or failure to report for any course: Cancellation fee equal to the course fee.

4.2 Course cancellations or postponements by CSI: CSI reserve the right to cancel and/or change the dates of any course up to 10 days before the commencement of the course.

5. SUBSTITUTE CANDIDATES

Applicants may nominate in writing substitute candidates when accepted applicant is not in a position to attend a course. Applications by substitute candidates must be made to CSI in writing, no later than five days before the commencement of any course. All substitute candidates must qualify in terms of the entrance and other requirements that may be applicable to the course.

6. CONFIDENTIALITY

CSI may not provide any student information, including results, to any third party, including employers and funders, without the written consent of the student. Students are encouraged to authorize CSI to disclose such information to employers and funders as applicable.

7. GENERAL

Each applicant is responsible for his/her own travel and accommodation arrangements. A list of accommodation providers is available on request. CSI takes no responsibility for any liabilities arising from incorrect information supplied in the application form. Applicants will use their health insurance in cases of sickness.

8. ENQUIRIES

Please contact Stella M. Mpanda or Godfrey Mnyawami for course and financial enquiries.

Telephone numbers 0745807205 or 0754432584 or 0652156355

Welcome to the Course!