

(Regulation 5(2))

## VERIFICATION CHECKLIST FOR APPLICATION FOR PROVISIONAL LICENCE

Notice to the Verifier:-

- a) TCU Form No. 1 must have been completed by the applicant in English; and
- b) In the course of verifying TCU Form No. 1, the verifier is required to make reference to various guidelines and check-lists as may be issued from time to time by the Commission, including the minimum guidelines and norms for governance units and harmonization of awards issued by the Commission.

PART I  
GENERAL MATTERS

|  | Verified | Compliance<br>Yes/No | Remarks |
|--|----------|----------------------|---------|
| 1. Name of applying organization/person  |          |                      |         |
| 2. Particulars of the applying organization/person                             |          |                      |         |
| 2.1 If the applicant is an organization:-                                      |          |                      |         |
| a) Type of the organization (Government/<br>Partnership/Trust/NGO/Society/etc) |          |                      |         |
| b) Origin of the Organisation (Local/Foreign)                                  |          |                      |         |
| c) Nature of business of the organization                                      |          |                      |         |
| d) Place of business of the organisation                                       |          |                      |         |
| e) Date of incorporation/registration  |          |                      |         |
| f) Incorporation/registration certificate number                               |          |                      |         |
| g) Date of expiry of the incorporation/registration certificate                |          |                      |         |
| h) Tax Identification Number (TIN)   |          |                      |         |
| i) VAT Registration Number   |          |                      |         |
| j) Name and title of the Chief Executive Officer of the<br>organisation        |          |                      |         |
| k) Physical address of the organization  |          |                      |         |
| l) Postal address of the organization  |          |                      |         |
| m) Postal Code   |          |                      |         |
| n) Telephone Numbers   |          |                      |         |
| o) Mobile Number   |          |                      |         |
| p) Fax Number  |          |                      |         |
| q) Email Address   |          |                      |         |
| r) Website   |          |                      |         |
| 2.2 If the applicant is an individual:-  |          |                      |         |
| (a) Name and title of the applicant  |          |                      |         |
| (b) Nationality  |          |                      |         |
| (c) Date and place of Birth  |          |                      |         |
| (d) Nature of business of the applicant  |          |                      |         |
| (e) Place of business of the applicant   |          |                      |         |
| (f) National Identification Number (NIN)                                       |          |                      |         |
| (g) Tax Identification Number (TIN)  |          |                      |         |
| (h) Physical address of the applicant  |          |                      |         |
| (i) Postal address of the applicant  |          |                      |         |

|   | Verified | Compliance<br>Yes/No | Remarks |
|---|----------|----------------------|---------|
| (j) Postal Code   |          |                      |         |
| (k) Telephone Numbers   |          |                      |         |
| (l) Mobile Number   |          |                      |         |
| (m) Fax Number  |          |                      |         |
| (n) Email Address   |          |                      |         |
| (o) Website   |          |                      |         |
| <b>PART II<br/>DETAILS OF THE PROPOSED INSTITUTION</b>  |          |                      |         |
| 3. Name of the proposed institution   |          |                      |         |
| 4. Category of the proposed institution (university/ college/ institute/ centre / directorate/ faculty/ department/unit)  |          |                      |         |
| 5. Type of the proposed institution (Public/ Private/Public Private Partnership (PPP))  |          |                      |         |
| 6. Particulars of the proposed institution:-  |          |                      |         |
| a) Physical address of the organization   |          |                      |         |
| b) Postal address of the organization   |          |                      |         |
| c) Postal Code  |          |                      |         |
| d) Telephone Numbers  |          |                      |         |
| e) Mobile Number  |          |                      |         |
| f) Fax Number   |          |                      |         |
| g) Email Address  |          |                      |         |
| h) Website  |          |                      |         |
| 7. Date the proposed institution was cleared in respect of anti Money Laundering (attach copy of Financial Intelligence Unit (FIU)/Tanzania Police Force (TPF) Clearance Certificate) |          |                      |         |
| 8. If applicable, Date the proposed institution was cleared for investment by Tanzania Investment Centre (TIC)  |          |                      |         |
| 9. Particulars of land available for the proposed institution   |          |                      |         |
| a) The amount of land owned by the institution  |          |                      |         |
| b) If the land is leased or rented, provide a copy of the agreement   |          |                      |         |
| c) Land for future expansion for the institution  |          |                      |         |
| <b>PART III<br/>PROPOSED FACILITIES</b>   |          |                      |         |
| 10. Physical Facilities as per approved check list  |          |                      |         |
| 11. Laboratory facilities, if applicable, as per approved check list  |          |                      |         |
| 12. Workshops, if applicable, as per approved check list  |          |                      |         |
| 13. Teaching Clinics (veterinary and/or medical), if applicable, as per approved check list   |          |                      |         |
| 14. Staff offices as per approved check list  |          |                      |         |
| 15. Functional facilities (i.e. conference hall, common rooms etc), where applicable, as per approved check list  |          |                      |         |
| 16. Students' accommodation and related facilities as per approved check list   |          |                      |         |
| 17. Health and sanitation facilities as per approved check list   |          |                      |         |
| 18. ICT infrastructure as per approved check list   |          |                      |         |
| 19. Library resources as per approved check list  |          |                      |         |

|   | Verified | Compliance<br>Yes/No | Remarks |
|---|----------|----------------------|---------|
| 20. Facilities for persons with special needs as per approved check list                      |          |                      |         |
| 21. Facilities for public safety and security as per approved check list                      |          |                      |         |
| <b>PART IV<br/>ADMINISTRATIVE TOOLS</b>   |          |                      |         |
| 22. Date the master plan was developed and approved   |          |                      |         |
| (a) Approving authority   |          |                      |         |
| (b) Nature of the approving authority   |          |                      |         |
| 23. Date the strategic plan was developed and approved  |          |                      |         |
| (a) Approving authority   |          |                      |         |
| (b) Nature of the approving authority   |          |                      |         |
| 24. Date of approval of the implementation plan   |          |                      |         |
| (a) Approving authority   |          |                      |         |
| (b) Nature of the approving authority   |          |                      |         |
| 25. Date the project write-up was developed and approved                                      |          |                      |         |
| (a) Approving authority   |          |                      |         |
| (b) Nature of the approving authority   |          |                      |         |
| 26. In case of a local institution, date the draft charter was developed and approved         |          |                      |         |
| (a) Approving authority   |          |                      |         |
| (b) Nature of the approving authority   |          |                      |         |
| 27. In case of a foreign institution, date the institution charter was developed and approved |          |                      |         |
| (a) Approving authority   |          |                      |         |
| (b) Nature of the approving authority   |          |                      |         |
| (c) Letter from the foreign body that accredited the institution                              |          |                      |         |
| <b>PART V<br/>PROPOSED PROGRAMMES CLUSTERS</b>  |          |                      |         |
| 28. Clusters of the proposed programmes:-   |          |                      |         |
| (a) Agriculture   |          |                      |         |
| (b) Architecture and Planning   |          |                      |         |
| (c) Business  |          |                      |         |
| (d) Faith Based Studies   |          |                      |         |
| (e) Education   |          |                      |         |
| (f) Engineering and Technology  |          |                      |         |
| (g) Environmental Studies and Forestry  |          |                      |         |
| (h) Humanities and Arts   |          |                      |         |
| (i) Information and Communication Technology  |          |                      |         |
| (j) Journalism, Media Studies and Communication   |          |                      |         |
| (k) Language Studies  |          |                      |         |
| (l) Law   |          |                      |         |
| (m) Library, Archives and Museum Studies  |          |                      |         |
| (n) Life Sciences   |          |                      |         |
| (o) Medicine, Veterinary and Allied Health Sciences   |          |                      |         |
| (p) Military Sciences   |          |                      |         |
| (q) Mining and Earth Sciences   |          |                      |         |

|  | Verified | Compliance Yes/No | Remarks |
|--|----------|-------------------|---------|
| (r) Physical Sciences and Mathematics  |          |                   |         |
| (s) Social Sciences  |          |                   |         |
| (t) Tourism, Hospitality and Home Economics  |          |                   |         |
| (u) Others ( <i>specify</i> )  |          |                   |         |
| 29. List of initial programmes to be offered by the institution, mode of delivery and number of students in each programme |          |                   |         |
| 30. The proposed fee structure for each of the initial programme   |          |                   |         |

**PART VI  
THE STRENGTH OF THE PROPOSED INSTITUTION**

31. The Anticipated Staff Strength

| SN           | Qualifications           | Employment status | Academic Staff | Date to be attained | Administrative and Technical Staff | Date to be attained | Total Number | Verified | Compliance Yes/No | Remarks |
|--------------|--------------------------|-------------------|----------------|---------------------|------------------------------------|---------------------|--------------|----------|-------------------|---------|
| 1            | PhD                      | Full time         |                |                     |                                    |                     |              |          |                   |         |
|              |                          | Part time         |                |                     |                                    |                     |              |          |                   |         |
| 2            | Masters                  | Full time         |                |                     |                                    |                     |              |          |                   |         |
|              |                          | Part time         |                |                     |                                    |                     |              |          |                   |         |
| 3            | Bachelors                | Full time         |                |                     |                                    |                     |              |          |                   |         |
|              |                          | Part time         |                |                     |                                    |                     |              |          |                   |         |
| 4            | Other ( <i>Specify</i> ) | Full time         |                |                     |                                    |                     |              |          |                   |         |
|              |                          | Part time         |                |                     |                                    |                     |              |          |                   |         |
| Total Number |                          | Full time         |                |                     |                                    |                     |              |          |                   |         |
|              |                          | Part time         |                |                     |                                    |                     |              |          |                   |         |

**PART VII  
SOURCE OF FUNDS, REFERENCES AND DECLARATION**

| S/N |   | Verified | Compliance Yes/No | Remarks |
|-----|---|----------|-------------------|---------|
| 32. | The source of funds for the establishment and running of the institution (evidence provided)            |          |                   |         |
| 33. | Reference of previous experience in establishing or running an education institution                    |          |                   |         |
| 34. | Names and addresses of at least three (3) referees who may be contacted in relation to this application |          |                   |         |
|     | (i) 1 <sup>st</sup> Referee:.....   |          |                   |         |
|     | (ii) 2 <sup>nd</sup> Referee: .....   |          |                   |         |
|     | (iii) 3 <sup>rd</sup> Referee: .....  |          |                   |         |

PART VIII  
CHARTER AND STRATEGIC PLAN ISSUES

| SN  | Item   | Verifications <i>(please tick)</i> |                |
|-----|--|------------------------------------|----------------|
|     |  | Compliance                         | Non Compliance |
| 35. | <i>Submitted a draft charter using the model charter which has the following provisions:</i> |                                    |                |
|     | • General Issues   |                                    |                |
|     | • Governance   |                                    |                |
|     | • Administration   |                                    |                |
|     | • Appointments   |                                    |                |
|     | • Staff of the Institutions  |                                    |                |
|     | • Students administration and welfare  |                                    |                |
|     | • Staff and students disciplinary matters  |                                    |                |
|     | • Planning, Budgeting, Resource Management   |                                    |                |
|     | • Staff associations   |                                    |                |
|     | • Students' organizations  |                                    |                |
|     | • Convocations and alumni associations   |                                    |                |
| 36. | <i>Submitted a Strategic Plan which includes:-</i>   |                                    |                |
|     | • Growth in terms of student enrolment,  |                                    |                |
|     | • Human resource capacity and qualifications   |                                    |                |
|     | • Financial capacity and sustainability  |                                    |                |
|     | • Growth in terms of programmes  |                                    |                |
|     | • Growth in terms of infrastructure and physical facilities                                  |                                    |                |
|     | • Staff development  |                                    |                |

Recommendation(s) .....

.....

Conclusion: .....

.....

Name: ..... Designation: .....

Date Checked: ..... Signed: .....

|   |                              |                    |
|---|------------------------------|--------------------|
| <i>FOR OFFICIAL USE ONLY</i>  |                              |                    |
| <i>(i) Endorsement by Director of Accreditation and Quality Assurance</i> |                              |                    |
| <i>Signature: .....</i>   | <i>Date...../...../.....</i> |                    |
| <i>(ii) Endorsement by Accreditation Committee</i>                        |                              |                    |
| <i>Date...../...../.....</i>  |                              |                    |
| <i>Form verified by:</i>  |                              |                    |
| <i>Name: .....</i>  | <i>Signature:.....</i>       | <i>Date: .....</i> |