

THE UNITED REPUBLIC OF TANZANIA



Valuers Registration Board

Ministry of Lands, Ardhi House
Office Number 511, 5th Floor, Post Code 1, P.O. Box 109,
Dar es Salaam, Tanzania
Telephone: +255 222-676-832



FORM NO. 1

THE VALUERS REGISTRATION BOARD
CANDIDACY REGISTRATION FORM
Made under rule 3(2))

APPLICATION FOR CANDIDACY REGISTRATION

SECTION A: CANDIDACY REGISTRATION

1. PERSONAL DETAILS

SURNAME FIRST NAME OTHER NAMES (Initials)

2. GENDER (TICK [ ]) M: F:

3. CURRENT ADDRESS:

Tel. No. Fax No. Email:

4. DATE OF BIRTH PLACE OF BIRTH

NATIONALITY

5. EMPLOYMENT

(a) NAME AND ADDRESS OF PRESENT EMPLOYER

PRESENT DESIGNATION (Position)

DATE OF APPOINTMENT

(b) If not employed indicate what you are currently engaged in e.g. student, etc.

(i) Student Name of Institution/School

(ii) Others Indicate type of engagement

EDUCATION/PROFESSIONAL QUALIFICATIONS

(c) Secondary: "O" Level

School	Subject	Grade	Year

(d) Secondary: "A" Level

School	Subject	Grade	Year

(e) Professional Qualification/University Degree/Diploma/Certificate awarded

Institution	Qualification	Speciality	Duration	Year completed	Full/Part Time

I desire to undertake the Board' Examinations and I am currently aspiring for:

Technician Level	
Professional; Level I	
Professional : Level II	

6. APPLICATION FEE

I enclose here with receipt No.....being payment for the selected examination category fees below:

Form Fee	-	Tshs.....
Reg. Fee	-	Tshs.....
Student's Annual Subscription fee	-	Tshs.....

Payment GEPG control number .....dated.....

10. DECLARATION BY THE APPLICANT:

I have read and agreed to abide by the Examination Regulations and by laws of the Board and accept that any false information supplied by me invalidate my application.

Applicant's signature \_\_\_\_\_

Date \_\_\_\_\_

SECTION B:

11. CERTIFICATION AND DECLARATION

*(This must be signed by your employer or if you are attending a college as a full time/part time*

*Student, your Principal or Course Coordinator).*

I,

\_\_\_\_\_

*Certify that the above-named applicant has been/is known to me for*

\_\_\_\_\_y  
*ears/months, and his/her character is such that He/She is fit and proper person to take the examination of the Board and that to the best of my knowledge, the above information is correct.*

*Signature of*  
*Employer/Principal/Course Coordinator* \_\_\_\_\_

*Date* \_\_\_\_\_

*Official Stamp*

## NOTES FOR GUIDANCE

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1. An applicant is required to fill the application form. The duly filled application form should be submitted with the following attachments:
  - (a) Educational and professional certificates including transcripts duly certified by a Magistrate or Notary Public.
  - (b) Three colored identical passport size photographs (recently taken) with your name written and signed on the back of each photograph.
  - (c) Registration fee - Non-refundable, if application is to be posted, payment should be made by either Cheque or through direct bank deposit and the mode of payment used should be indicated. DO NOT POST CASH.
  - (d) Non citizens shall be charged double the rate applicable.
  - (e) Payment of Candidacy Registration and/or Exemption Fees can be made through Government Payment Gateway control number.
  
2. In filling the form, use BLOCK LETTERS. It is important to write your three names in full starting with your FIRST NAME.  
Please note that our records will be maintained on the basis of your first name and the order of names given in your Candidacy Registration forms. Therefore, your names will appear on Certificate(s) to be awarded to you by the Board in that order.
  - (a) *Names that you use are those which appear on the certificate(s) attached with your application forms for registration with the Board.*
  - (b) *The Board shall not accept any request for change of name once an application for Candidacy Registration and/or Examination Entry has been lodged.*
  
3. **Mailing Address**  
The address indicated under para (3) on the first page of this form shall be the official contact address between you and the Board. Should you desire to have a different address, kindly notify the Board accordingly
  
4. **Incomplete Form**  
If you do not complete this form correctly or enclose all required documents as instructed, or submit insufficient amount of fees, your application shall be rejected.
  
5. **Closing Dates**  
Candidacy Registration forms should be submitted to our offices duly paid on or before the closing date. For late applications, kindly ensure that the additional penalty fee is payable on submission. All your enquiries in connection with the Board's Examinations should be directed to Registrar

FOR OFFICIAL USE ONLY

SECTION C: CANDIDACY REGISTRATION

FORM CHECKED BY \_\_\_\_\_ ON \_\_\_\_\_

CERTIFICATE(S) INSPECTED BY \_\_\_\_\_ ON \_\_\_\_\_

FEE RECEIPT NUMBER \_\_\_\_\_ SHS. \_\_\_\_\_  
OF \_\_\_\_\_

REGISTRATION ACCEPTED \_\_\_\_\_

REGISTRATION REJECTED \_\_\_\_\_

REASONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXAMINATION ELIGIBILITY

Examination Level	Paper(s)