



**SOKO MEMORIAL INSTITUTE OF HEALTH AND ALLIED SCIENCES
(SMIHAS)**

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**JOINING INSTRUCTIONS FOR BASIC CERTIFICATE, AND ORDINARY DIPLOMA IN CLINICAL
MEDICINE AND PHARMACEUTICAL SCIENCES 2026/2027.**

NACTE REG/NACTVET/1176

JOINING INSTRUCTIONS

The Management of SOKO MEMORIAL INSTITUTE OF HEALTH AND ALLIED SCIENCES congratulates you for being selected to join the Institute for studies of an Ordinary Diploma in Clinical Medicine / Pharmaceutical sciences.

Dear

It is with great pleasure to inform you that, you have been selected and allowed to report on **14/09/2026** And qualified to pursue the course of.....

Which will start on 2026 URAMBO – TABORA.

Soko Memorial Institute of Health and Allied Sciences (SMIHAS) offers the following courses

COURSE	Duration (Years)	Entry Qualifications	Tick
Stashahada ya Afisa Tabibu (Diploma in Clinical medicine)	3	Holders of Certificate of Secondary Education Examination (CSEE) with at least Four (4) passes in nonreligious subjects including Chemistry, Biology and Physics/Engineering Sciences.	
Stashahada ya Famasia (Diploma in Pharmaceutical Sciencies)	3	Holders of Certificate of Secondary Education Examination (CSEE) with at least Five (5) passes in nonreligious subjects including Biology, Chemistry, Physics, Mathematics, and English Language.	

Admission Requirements

The orientation week for all new students shall begin on

All candidates must undergo a Medical Examination and bring with them a filled Medical Certificate of Fitness/Health (A Medical Examination Form/Certificate is enclosed herein),

All candidates must bring Form IV Certificate, Birth certificate, Fee pay in-slip for first installment, as indicated in the fee structure.

APPLICANT DETAILS (MAELEZO YA MWOMBAJI)

First name	Second name	Last name	Date of Birth	Nationality

Gender		Marital Status		You have a disability	
Male	Female	Single	Married	Yes	No

PERMANENT HOME ADDRESS (ANUANI YA KUDUMU)

Country/Nchi	Region/mkoa	District/wilaya	Ward/kata	Village /Street
Country code	Address	Telephone	Email	Home Telephone

Highest level of Education

Religion: (Specify) ROMAN
CATHOLIC, LUTHERAN, ANGLICAN, CASFETA, TUCASA, SHIR, BAKWATA

Sports and Games

.....
(Specify) FOOTBALL, NETBALL, BASKETBALL, VOLLEYBALL, JOGGING, OTHER

NAMBA YA

NIDA.....

Father:

Name.....Phone No.....

Address.....

Mother:

Name.....Phone No.....

Address.....

Guardian (Mlezi)

Name.....Phone No.....

Address.....

Close relative (Jamaa wa karibu)

Name.....Phone No.....

Address.....

TAFADHALI MALIPO YOTE YAFANYIKE BENKI YA NMB
A/C No 51310045334 JINA Soko Memorial Institute.

1. FEE STRUCTURE FOR ACADEMIC YEAR 2026/2027

	PROGRAM	TUITION FEE
1	CLINICAL MEDICINE →	1,400,000/=

2	PHARMACEUTICAL SCIENCES →	1,200,000/=
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2. OTHER CHARGES

	ITEM	AMOUNT	PAYED
1	Registration Fee	60,000/=	Every Year At The Beginning Of the First Semester
2	Students' Union	10,000/=	Every Year At The Beginning Of the First Semester
3	Nactvet Quality Assurance Fee	20,000/=	Every Year At The Beginning Of the First Semester
4	Local Examination	300,000/=	Every Year At The Beginning Of the First Semester
5	Stationery	65,000/=	Every Year At The Beginning Of the First Semester
6	Internet	25,000/=	Every Year At The Beginning Of the First Semester
7	Sports	20,000/=	Every Year At The Beginning Of the First Semester
8	Caution Money	50,000/=	First Semester (First Year)
	TOTAL	550,000/=	

3. TUITION FEE + OTHER CHARGES

	PROGRAM	TUITION FEE	OTHER CHARGES	TOTAL
1	CLINICAL MEDICINE →	1,400,000/=	550,000/=	1,950,000/=
2	PHARMACEUTICAL SCIENCES →	1,200,000/=	550,000/=	1,750,000/=

4. PAYMENTS WILL BE DONE IN FOUR (4) INSTALLMENTS

For Clinical Medicine						
	PAYMENTFOR:	1 ST INSTALLMENT (14/10/2026)	2 ND INSTALLMENT (01/01/2027)	3 RD INSTALLMENT (01/04/2027)	4 TH INSTALLMENT (25/06/2027)	TOTAL
1	TUITION FEE & OTHERS	487,500/=	487,500/=	487,500/=	487,500/=	1,950,000/=
2	HOSTEL	BURE	BURE	BURE	BURE	

TAFADHALI MALIPO YOTE YAFANYIKE BENKI YA NMB
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For Pharmaceutical Sciences					
PAYMENTFOR:	1 ST INSTALLMENT (14/10/2026)	2 ND INSTALLMENT (01/01/2027)	3 RD INSTALLMENT (01/04/2027)	4 TH INSTALLMENT (25/06/2027)	TOTAL
TUITION FEE & OTHERS	437,500/=	437,500/=	437,500/=	437,500/=	1,750,000/=
HOSTEL	BURE	BURE	BURE	BURE	

9. MCHANGANUO WA MALIPO KWA KOZI ZOTE KWA MWAKA				
1	ADA	1,400,000/=	1,200,000	KWA MWAKA – Ni lazima
2	MICHANGO (Others)	550,000/=	550,000	KWA MWAKA – Ni lazima
3	MALAZI (HOSTEL)	BURE	BURE	BURE
	TOTAL	1,950,000/=	1,750,000	KWA MWAKA

**1. MALIPO MENGINE – MICHANGO KWA KOZI ZOTE MWAKA WA KWANZA (1)
FIRST YEAR. NMB A/C No 51310045334 JINA Soko Memorial Institute**

		SEMESTER I	SEMESTER II	MAELEZO
1	NHIF KADI YA MATIBABU	50,400/=		Ni lazima kila mwanachuo kuchangia BIMA ya Afya kila mwaka. (mwenye BIMA hatolipia)
2	SARE YA CHUO	200,000/=		Mwanachuo atachangia mara moja kwa miaka 3, atapewa Uniform mbili, Sweta, Clinical Coat na T-shirts mbili. Au anaweza kushona uniform nyumbani kwa kufuata muongozo
3	VITABU VYA MAZOEZI (Procedure Books)	30,000/=		Mwanachuo atachangia mara moja tu kwa miaka 3.
4	PESA YA MITIHANI YA WIZARA		150,000/=	Inalipwa kila mwaka wizarani kupitia Chuoni.
5	Field work			Mwanafunzi atajitegemea gharama
	JUMLA	380,400/=	150,000/=	

NB: Pia Mwanafunzi aliyetimiza Umri wa miaka 18 anatakiwa kufika chuoni na NIDA au namba ya NIDA, Lengo ni kurahisisha kwenye zoezi la kupata Bina ya Afya NHIF.

(KWA VIFAA VILIVYOWEKEWA GHARAMA PIA VINAUZWA CHUONI AU WAWEZA KUTOKA NAVYO NYUMBANI)

1. MAHITAJI MUHIMU YA MWANACHUO.

Mwanachuo kabla ya kuanza masomo lazima awe na vifaa vifuatavyo:-

A. VIFAA VYA MASOMO,

- Kamusi ya Tiba (Medical Dictionary) - Inauzwa Chuoni (Tsh 25,000/=)
- Futi kamba (Tape measure Tsh 1,000/=) na rula Tsh 1,000/=
- Kalamu za rangi kwa ajili ya kuchora @ 1,500/=
- Kalamu za wino (blue, red na green @ 200/=)
- Madaftari (Counter books 5 Quire 2 @2,500/= au Quire 3@3,500/=)

B. VIFAA VINGINE.

- a) Nyenzo za kusalia katika dhehebu lako.(Misaale ya waamini, Rozari kwa wakatoliki) b) Chandarua (Mviringo) 4 kwa 6
- c) Blanketi 1
- d) Mashuka manne (4) yenye upana na urefu wa kutosha kufunika godoro (Urefu mita 2½ na mita 1½ upana) 4
- e) Taulo 1
- f) Kwa wavulana viatu vyeusi vilivyofunikwa, viwe vya ngozi, viwe na kisigino kifupi (jozi 2), soksi nyeusi.
- g) Kwa wasichana viatu vyeusi vilivyofunikwa viwe vya ngozi, viwe na kisigino kifupi au visiwe na kisigino (jozi 2), na Soksi jozi 2 nyeupe
- h) Ndoo ya plastiki yenye mfuniko ya lita 20 (zinauzwa chuoni) **Tsh 5,000/=**
- i) Matumizi ya lazima sabuni, mafuta, vibanio vya nguo, kitana.
- j) Box moja (1) la clean gloves **Tsh 10,000/=**
- k) Mfagio wa plastic (broom), Raba ya Kudekia na brashi(**Tsh 10,000=**) Vifaa vya michezo vyenye ubora (Viata vya kuchezea mpira wa miguu KE na ME au Raba za kukimbilia /Jogging, Volleyball, Netball na Basketball- Unakuja navyo.
- l) Vifaa vya michezo Bukta, Fulana, Soksi (Rangi inaweza kuwa ya Blue,Nyeupe,kijani au nyekundu)**ni lazima kushiriki michezo chuoni**
- m) Kwa wanafunzi wa kozi ya utabibu(Clinical medicine) tu watatakiwa kuwa na vifaa vifuatavyo:- Stethoscope,BP machine and Thermometer (150,000/=)

NB: KWA WALE WANAFUNZI WANA OISHI CHUONI HOSTEL NI BURE GODORO NA KITANDA UNAPEWA BURE CHUONI, MAJI NA UMEME VINAPATIKANA MUDA WOTE CHUONI.

MEDICAL EXAMINATION CERTIFICATE

A: PERSONAL DETAIL

FIRST NAME MIDDLE NAME

SURNAME..... AGE..... SEX.....

MARITAL STATUS.....

HOME ADDRESS VILLAGE WARD.....

DISTRICT.....

B: PERSONAL HISTORY

Is the examinee suffering from any of the following? Indicate Yes or No. If Yes give the results:

- | | |
|---|---------------------------------|
| 1. Tuberculosis..... | 2. Leprosy..... |
| 3. Pneumonia..... | 4. Typhoid fever..... |
| 7. Rheumatic fever..... | 8. Allergy disorder..... |
| 9. Heart Disease..... | 10. Recurrent headache..... |
| 11. Gastric or duodenal ulcer..... | |
| 12. Hepatitis B..... | 13. Recurrent indigestion..... |
| 14. Jaundice..... | 15. Dysentery..... |
| 16. Sickle cell diseases..... | 17. Varicose veins..... |
| 18. Kidney or urinary diseases..... | |
| 19. Other forms of Liver diseases..... | |
| 20. Epilepsy | 21. Diabetes mellitus..... |
| 22. Psychotic disorders..... | 23. Deformity (state type)..... |
| 24. Ear, nose or throat disorder..... | |
| 25. Eye disorder..... | 26. Skin disease..... |
| 27. Gynecological disorder..... | 28. Skin disease..... |
| 29. Malaria other tropical disease..... | |
| 30. Major or minor operations..... | 31. Serious accidents..... |
| 32. Any other serious disorder..... | |

C: PHYSICAL EXAMINATION

Height..... Weight..... BP:...../.....

HB:..... RBG.....

Cardiovascular System..... Urine Analysis.....

Stool analysis: Special emphasis on Hookworm or Bilharzia

(a) Neutrophils..... (b) Eosinophils..... (c) Basophiles.....

(d) Lymphocytes..... (e) Monocytes..... (f) ESR.....

Serology: Widal test..... VDRL.....

6. Pregnancy Test (Female only)Hepatitis B:.....

D: CONCLUSION

I have examined Mr/Mrs/Miss/Sr/Br/Fr.....

Aged years old and considered that she/he is physically, mentally fit to be registered for studies/is not physically and mentally fit to be admitted to college studies.

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Name of examining Dr./Clinician:

Signature.....

Qualification:..... Date.....

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Official Stamp: