

**MOSHI CO-OPERATIVE UNIVERSITY (M<sub>o</sub>CU)  
CHUO KIKUU CHA USHIRIKA MOSHI**

FEE STRUCTURE FOR 2017/2018 ACADEMIC YEAR: TANZANIAN STUDENTS (in TShs.)

(1) DIRECT COST PAYABLE TO UNIVERSITY	CIT	CMF/CAF/CMA/CLIS/CED/HRM	DIPLOMA PROGRAMMES		DEGREE PROGRAMMES			PGD
			1 <sup>ST</sup> YEAR	2 <sup>ND</sup> YEAR	1 <sup>ST</sup> YEAR	2 <sup>ND</sup> YEAR	3 <sup>RD</sup> YEAR	
	TShs.	TShs.	TShs.	TShs.	TShs.	TShs.	TShs.	TShs.
TUITION FEE	730,000	700,000	750,000	750,000	1,100,000	1,100,000	1,100,000	1,240,000
<b>TOTAL</b>	<b>730,000</b>	<b>700,000</b>	<b>750,000</b>	<b>750,000</b>	<b>1,100,000</b>	<b>1,100,000</b>	<b>1,100,000</b>	<b>1,240,000</b>
<b>(2) STUDENTS' COSTS PAYABLE DIRECT TO THE UNIVERSITY BY STUDENTS</b>								
MEDICAL CAPITATION	100,000	100,000	100,000	100,000	100,000	100,000	100,000	100,000
FACILITY DEPRECIATION FEE	30,000	30,000	30,000	-	30,000	-	-	30,000
STUDENTS' ORGANIZATION	10,000	10,000	10,000	10,000	10,000	10,000	10,000	10,000
TCU QUALITY ASSURANCE FEE	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000
REGISTRATION FEE	20,000	20,000	20,000	20,000	20,000	20,000	20,000	20,000
<b>TOTAL</b>	<b>180,000</b>	<b>180,000</b>	<b>180,000</b>	<b>150,000</b>	<b>180,000</b>	<b>150,000</b>	<b>150,000</b>	<b>180,000</b>
<b>(3) DIRECT RECOMMENDED MINIMUM STUDENTS COSTS : PAYABLE TO THE STUDENT</b>								
ACCOMMODATION	400,000	400,000	400,000	400,000	400,000	400,000	400,000	400,000
MEALS	1,310,000	1,310,000	1,310,000	1,310,000	1,310,000	1,310,000	1,310,000	1,310,000
FACULTY REQUIREMENT	100,000	50,000	50,000	50,000	100,000	100,000	150,000	150,000
BOOKS	100,000	100,000	100,000	100,000	200,000	200,000	200,000	300,000
FIELD ASSIGNMENT	-	-	-	350,000	-	400,000	-	-
RESEARCH	-	-	-	-	-	-	400,000	500,000
<b>TOTAL</b>	<b>1,910,000</b>	<b>1,860,000</b>	<b>1,860,000</b>	<b>2,210,000</b>	<b>2,010,000</b>	<b>2,410,000</b>	<b>2,460,000</b>	<b>2,660,000</b>
<b>TOTAL FEES (1+2+3)</b>	<b>2,820,000</b>	<b>2,740,000</b>	<b>2,790,000</b>	<b>3,100,000</b>	<b>3,215,000</b>	<b>3,670,000</b>	<b>3,810,000</b>	<b>4,080,000</b>

- **MEDICAL CAPITATION IS COMPULSORY FOR ALL STUDENTS and MUST BE PAID ON REGISTRATION AT M<sub>o</sub>CU** .If you are already a member of National Health Insurance Fund, you will be required to pay 49,600/= only to the University to cover for other expenses which are not covered by the NHIF.
- Tuition fee paid is for that particular academic year, and it is subject to review from time to time when need arises.
- The University has limited accommodation facilities in Campus. Arrangements shall be made for off-campus accommodation after students' arrival.



## MOSHI CO-OPERATIVE UNIVERSITY

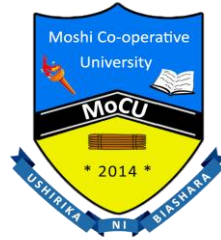
P.O. Box 474, Sokoine Road, Moshi, Tanzania

### FEE STRUCTURE FOR ACADEMIC YEAR 2015/2016: FOREIGN STUDENTS (in US \$)

PROGRAMMES	TUITION FEE	APPRICATION FEE	REGISTRATION FEE	EXAMS	CAUTION MONEY	RESIDENT PERMIT	MEDICAL FEE	SUB TOTAL (A)	FIELD ATTACHMENT & RESEARCH	BOOKS & STATIONERY	ACCOMMODATION	MEALS	SUB TOTAL (B)	GRAND TOTAL (A+B)	IDENTITY CARD	SUPERVISION	GRADUATION	GRAND TOTAL
															US \$	US \$	US \$	US \$
<b>ALL CERTIFICATE PROGRAMMES</b>																		
CMF/CAF/CMA	1100	20	45	80	20	102	100	<b>1467</b>		300	80	1300	<b>1680</b>	<b>3147</b>	5		15	<b>3167</b>
CIT	1100	20	45	80	20	120	100	<b>1485</b>		300	80	1300	<b>1680</b>	<b>3165</b>	5		15	<b>3185</b>
<b>DIPLOMA PROGRAMME</b>																		
1 <sup>ST</sup> YEAR	1200	20	45	80	20	120	100	<b>1585</b>		300	80	1300	<b>1680</b>	<b>3265</b>	5			<b>3270</b>
2 <sup>ND</sup> YEAR	1200	20	25	90		120	100	<b>1555</b>	400	300	80	1300	<b>2080</b>	<b>3635</b>		85	15	<b>3735</b>
<b>ALL DEGREE PROGRAMMES</b>																		
1 <sup>ST</sup> YEAR	1300	20	45	90	20	120	100	<b>1695</b>		300	80	1300	<b>1680</b>	3375	5			<b>3380</b>
2 <sup>ND</sup> YEAR	1300	20	25	90		120	100	<b>1655</b>	400	300	80	1300	<b>2080</b>	3735		100		<b>3835</b>
3 <sup>RD</sup> YEAR	1300	20	25	100		120	100	<b>1665</b>	400	300	80	1300	<b>2080</b>	3745		100	15	<b>3860</b>
<b>All Postgraduate Diploma</b>	1500	30	45	110		120	100	<b>1905</b>	500	300	80	1300	<b>2180</b>	4085	5	150	15	<b>4255</b>

**MOSHI CO-OPERATIVE UNIVERSITY (MoCU)**  
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**STUDENT’S MEDICAL EXAMINATION FORM**

NAME OF THE STUDENT (in full) .....

Nationality.....Age.....Sex.....Marital Status.....

**PERSONAL HISTORY**

Has examine suffered from any of the following? If yes indicate data and diagnosis. If not please write “NO” in appropriate space.

- a) Tuberculosis .....
- b) Other respiratory diseases .....
- c) Cardiac Disease .....
- d) Gastro – Intestinal disease.....
- e) Renal or Genitor Urinary disease .....
- f) Syphilis or Gonorrhoea .....
- g) Emotional disease or psychosis .....
- h) Serious Injuries .....
- i) Allergies .....
- j) Any fits .....
- k) Leprosy .....

**PHYSICAL EXAMINATION**

- 1. Height ..... 2. Weight.....
- 3. Chest – Lungs
  - Heart.....
  - BP .....

4. Abdomen
  - Organs .....
  - Other Mass .....
  - Pregnancy .....
  
5. Skin disease .....
  
6. Eyes: Conjunctive ..... Pupils .....
  - Sight: Without glasses ..... Right ..... Left .....
  - Sight: With glasses ..... Right ..... Left .....
  
7. ENT.....
  
8. LAB INVESTIGATIONS
  - a) ESR ..... WBC ..... B/S ..... Stool ..... Urine .....
  - b) S.T.I. ....
  
9. Any Physical challenges of the Prospective student plus the Doctors recommendations
 

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**DOCTOR'S RECOMMENDATIONS:**

I have examined Mr./Mrs./Miss .....and considered that he/she is FIT/NOT fit to be enrolled as a student at MoCU.

Name of the Doctor.....

Title .....

Qualifications ..... (Official Stamp)

Signature.....

Date: .....