THE UNITED REPUBLIC OF TANZANIA
THE ENGINEERS REGISTRATION BOARD

THE STRUCTURED ENGINEERS APPRENTICESHIP PROGRAMME (SEAP)

APPLICATION FORM FOR ADMISSION INTO SEAP

Section 1: Particulars of the Applicant

1.1   Name of the applicant (*first and surname in full*): …………………………………………………

Gender and age   Male ☐   Female ☐   Date of Birth………………….Age………years

1.2   Academic qualification attained by the applicant: …………………………………………………

1.3   Engineering specialization
(e.g. civil, mechanical, electrical, mining, textile, etc):…………………………………….............

1.4   GPA Score of the academic degree/Advanced diploma award (or equivalent)………………………

1.5   Name of institution from which applicant

graduated:………………………………………………………………………………………...

1.6   Year of Graduation……………………………………………………………………………….

1.7   Postal Address: . ………………………………………………………………………………....

1.8   E-mail Address: …………………………………………………Tel:…………………………………

1.9   Current Employment (if any):

………………………………………………………………………………………………………

1.10 Years of work experience……………………………………………………………………………...

1.11 Please state your main duties and responsibilities at your current employment:

a.   ....

b.   ....

c.   ....

d.   ………………………………………………………………………………………………

1.12   **Attach the following documents:**
1) Certified copy of degree/Advanced diploma certificate (or other qualification);
2) Academic transcript;
3) Curriculum vitae;
4) Letter from employer (if employed);
5) Two (2) passport size photographs (colored);
6) Birth Certificate;
7) Certified copy of Form IV & VI certificates;
8) Any other relevant information that the applicant wishes to include;

Section 2: Declaration

I certify that the particulars furnished in this application form are correct and complete in all respects and that no relevant information has been withheld. I understand that misrepresentation, falsification and/or withholding information in regard to this application are serious offences that may result in nullification of the application or withdrawal of the admission into SEAP and/or prosecution.

Applicant's Signature: …………………………………Date:………………………………………………….

Section 3: Applicant's Witness and Referee – (to be filled by a Registered Engineer)

Signed by the said…………………………….............................(Applicant) in the presence of…………………………………………………….(Name) who is a registered engineer in the category……………………………………………..with Engineers Registration Board.

Postal Address:……………………………….......Phone No:…………………………………………………

E – mail:…………………………………………..Physical Address:……………………………………………

Date:………………………………………….(Engineers Official Stamp)

Section 4: Assessment by ERB Secretariat (for official use only)

4.1   Criteria for Selection

Criteria	*Maximum Score*	Scores				
		1	2	3	4	5
Academic Qualification	*25 for GPA 5.0*					
Years since Graduation	*10 for 0-1 yr and tapering to 2 for 5 yrs*					
Prior experience	*10 for no experience, tapering to 2 for 5 years unsupervised experience*					
	10 for26 years, and tapering to 2 for 32					

Age	*years*					
Registration with ERB	*10 bonus pts for registration with ERB*					

4.2 Total Score (max. 65): …………………………………………………………………..............

4.3 Recommendation by ERB Secretariat

☐ Application Accepted ☐ Application Rejected

Reason: …………………………………………………………………….........................

4.4 Allocation of Training

The candidate is recommended for placement with ……………………………………. for SEAP

training for a period of …………………months, starting from: …………………………….....

Signature …………………………..……… Date …………………………………………………

Registrar, Engineers Registration Board

Section 5: Decision of the Board

The Board during its ………………. meeting of ………………………………………… deliberated on the submission by the applicant and the recommendations by the ERB Secretariat and made the following decision:

1. The applicant be placed with ………………………………………….. for SEAP training for a period of ………………………….. Months , starting from:……………………...
2. The application is rejected.

Further remarks (if any)

………………………………………………………………………….……………………

……………………………………………………………………………………………….

Signature ……………………………..……..Date …………………………………………

(Official Stamp)

TRAINEES ACCEPTANCE AND COMMITMENT FORM

I ………………………………………………… (Name of trainee)

Of ………………………………………………….

…………………………………………………. (Postal Address)

Do hereby accept to join and complete SEAP training on the following conditions:-

Please tick where appropriate

(1) Only after the availability of sponsorship of the Board ☐

(2) Self Sponsorship ☐

(3) Employer Sponsorship ☐

TRAINEE'S SIGNATURE: ……………………..

DATE: ……………………………………………

Evaluation of the Applicant (for Official Use Only)

Applicants' Academic Qualification & Discipline				
S/N	**Criteria**	*Rating of score*	How much	Points
1	GPA	*25 for GPA 5.0*		
2	Years since Graduation	*10 for 0-1 yr and tapering to 2 for 5 yrs*		
3	Prior experience	*10 for no experience, tapering to 2 for 5 years unsupervised experience*		
4	Age	*10 for26 years, and tapering to 2 for 32 years*		
5	Registration with ERB	*10 bonus pts for registration with ERB*		
6	**Total score**			