



ERB-ReTAD-FRM-055

**United Republic of Tanzania**  
**Ministry of Works**  
**Engineers Registration Board (ERB)**  
P.O BOX 2768, Mhandisi Annex, Plot Number 13, Block "A"  
Tambukareli Street- NCC, Dodoma Tel: +255 26 2960086/87



ISO 9001:2015 Certified

## Consulting Engineer Application Form

### CONSULTING ENGINEER

#### APPLICATION FOR REGISTRATION

(Under the Engineers Registration Act, Cap 63)

#### FOR OFFICIAL USE

Application No. ....  
Date received: .....  
Application fee receipt  
No. ....  
Documents attached: .....  
To be processed on: .....  
Remarks: .....

#### 1. PERSONAL INFORMATION

(Names should be entered as they appear in the certificates)

(Use capital letters only)

(a) Full Name: \_\_\_\_\_  
(BLOCK LETTERS) (First) (Middle) (Surname) (Title)

(b) Place and Date of Birth: \_\_\_\_\_  
Town/City Country Date

(c) Age: \_\_\_\_\_ (d) Sex: Male/Female (e) Nationality: \_\_\_\_\_  
(Tick the appropriate)

(f) NIDA no.: \_\_\_\_\_

(g) Address (for registration and correspondence):  
\_\_\_\_\_  
\_\_\_\_\_

(h) Tel. ----- Mobile ----- Email -----

(j) Office Address:  
\_\_\_\_\_  
\_\_\_\_\_

(k) Tel. -----, Mobile ----- Email ----- Website(if any) -----

#### 2. ACADEMIC QUALIFICATIONS (Attach certified copies of certificates etc.)

(a) Engineering Discipline: \_\_\_\_\_  
 (State **whether** agricultural, aeronautical, civil, etc.)

(b) University or Institution Date of Attendance Qualification Attained Date Obtained  
 (Name and City/Country) From To

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**3. MEMBERSHIP OF PROFESSIONAL INSTITUTIONS OR REGISTRATION WITH SIMILAR BOARDS/ ENGINEERING COUNCILS** (Attach certified photocopies for active members only)

Institution/Association etc	Class of membership or Registration	Reg./membership Number	Date Obtained
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**4. SUMMARY OF POST-REGISTRATION PRACTICE** (Attach a copy of your detailed curriculum vitae outlining your achievements in engineering practice)

Period From: To:	Employer	Description of work showing your position, field of specialization and major contributions/achievements

(b) Field of Specialization Applying for: \_\_\_\_\_

**5. RECOMMENDATION** (to be filled and signed by Registered Consulting/Independent Consulting Engineers)

We the undersigned do consider the applicant a proper and fit person to be registered as a consulting engineer.

Name	Address	Association with applicant	Engineer's Rubber Stamp
1			
2			

**6. APPLICATION FEE**

My application fee in the amount of Tshs \_\_\_\_\_ is enclosed.

**7. DECLARATION**

I hereby apply for registration as a Consulting Engineer and undertake to abide by all provisions of the Engineers Registration Act, Cap 63 and any regulations and by-laws made thereunder including Code of Conducts and Ethics. I certify that, to the best of my knowledge, the information contained herein is true and correct.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

**NOTES:**

1. Please type or print neatly.
2. Applicants must make sure that all parts of this form are fully completed. Incomplete applications will not be accepted by the Board.
3. Completed application forms together with full application fees should be sent to the Registrar, Engineers Registration Board at the address shown on the top of page 1 of the application form.