

FOUNDATION STAGE

EXAM FORM³

Form Fee – Shs.20,000/=

(NBAA)
THE NATIONAL BOARD OF ACCOUNTANTS AND AUDITORS
TANZANIA

Mhasibu House,
Bibi Titi Mohamed Street,
P.O. Box 5128,
DAR ES SALAAM.

Tel. Nos. +255 2211890/9 Mobile 0736-218031
Fax.No. 2151746
E-mail: info@nbaa.go.tz
Website: www.nbaa.go.tz

FOUNDATION STAGE EXAMINATION ENTRY FORM

Before filling in this form, please study carefully the examination procedures and regulations as stipulated in the “Syllabus” and “Examination & Training By laws”.

1. CANDIDACY REGISTRATION NUMBER (CR.NO.)

2. NAME

SURNAME (LAST NAME)	FIRST NAME	OTHER NAMES (INITIAL(S))

3. ADDRESS FOR POSTING EXAMINATION ADMISSION LETTER/RESULTS
LETTER/LEARNING MATERIALS

Postal Address:	Email (Write your email legibly)
	Phone No:

4. I wish to sit for the Examinations to be held in

MONTH
YEAR

5. I hereby apply to sit for the following subject(s) (Tick the appropriate subject(s))

5.1 FOUNDATION LEVEL (Knowledge and Skills level)

EXAM CODE	SUBJECT	TICK (✓)	EXAM CODE	SUBJECT	TICK (✓)
A1	Quantitative Techniques		A4	Business Information	
A2	Business and Management		A5	Business Law	
A3	Accounting				

6. Preferred Examination Centre

→ (See Note I) overleaf

7. Certification by Institution:

I certify that the applicant is attending review classes at this centre and is adequately prepared to sit for the examination paper(s) applied for

Duration of Training: from..... to.....

Date:.....

8. CLOSING DATE:

MAY EXAMINATION SESSION	NOVEMBER EXAMINATION SESSION
15TH FEBRUARY	15TH AUGUST

9. PENALTY FEE FOR LATE SUBMISSION OF CANDIDACY AND EXAMINATION ENTRY APPLICATIONS AFTER CLOSING DATES

MODE OF PAYMENT	MAY EXAMINATIONS	NOVEMBER EXAMINATIONS
Payment with 50% penalty	16 th February – 28 th February	16 th August – 30 th August
Payment with 100% penalty	1 st March – 15 th March	1 st September -15 th September

NB: NO APPLICATION for examination entry shall be accepted after **16th March /September**

10. I hereby enclose Tshsbeing payment of examination fee the paper(s) applied for under paragraph 5 above.

11. Mode of payment:

I am submitting my payment in the form of Cheque/Visa Card/Mobile money transfer

No.....Dated.....

Direct **Bank Deposit**, Amount transferred:Tshs (*Attach Original Bank Pay in Slip*)

NB: Do Not post cash.

Cheques should be crossed A/C payee only.

12. DECLARATION BY THE APPLICANT:

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

13. **EXAMINATION FEES PAYABLE**

EXAMINATION FEES FOUNDATION	Single subject	Shs.100,000.00
	<i>Repeated subject</i>	<i>Shs.60,000.00</i>

***Non Citizens will be charged double the applicable rate.**

Signature:

Date:.....

FOR OFFICIAL USE ONLY

Examination fee shs. Receipt No:.....date:.....

Exemption fee shs.....Receipt No:.....date:.....

Subscription fee shs.....Receipt No:..... date:.....

Candidacy registration fee shs. Receipt No:date:

ENTRY APPROVED/NOT APPROVED on the following grounds:

.....

Executive Director:.....

Stamp:.....

Date:.....

*Delete as appropriate

This application is **NOT VALID** without Executive Director's stamp and Signature.

NOTES FOR GUIDANCE :

1. Current Examination Centres:
Arusha, Dar es Salaam, Dodoma, Mbeya, Morogoro, Moshi, Mwanza, Tanga Zanzibar, Iringa and Tabora.
2. Incomplete forms or those which have not been accompanied by the sufficient examination entry fees shall not be processed.
3. Examination entry application forms by candidates whose annual subscription fees are in arrears will not be processed.
4. Postponement/withdrawal from the examinations should be made on or before the closing date whereby full fees will be transferred to the immediate examination session.
5. Any cheque which is dishonoured due to lack of funds or for any other reason will result into the candidate being withdrawn from the Board's examinations.
6. Candidates are strongly encouraged to pay their examination fees early to avoid queues and uncalled for inconveniences on the last day.
7. Payment of examination entry form can be made through bank deposits at any **CRDB BRANCH to NBAA COLLECTION ACCOUNT NO.01J 100 555 3500 – CRDB BANK, VIJANA BRANCH, MOROGORO ROAD, DSM.**
The original Pay-in-slip should be attached with the Examination entry form and submitted to NBAA. A photocopied pay-in-slip is not acceptable.
8. In filling the form, use **BLOCK LETTERS**. It is important to write your three names in full starting with your **LAST NAME**.
9. Please note that our records will be maintained on the basis of your last 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.
10. **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.
11. Any form submitted to NBAA without the original Bank Pay-in-slip and/or Cheque will not be processed.
12. Applications to examination entry should be made on NBAA printed forms only and that photocopied/faxed shall not be accepted for purposes of registration.
13. International students shall be required to pay double the applicable rate
14. A candidate shall not be allowed to proceed to the next level of the examination unless he completes the lower level.
15. A candidate is advised to fill an appropriate examination level and papers to be attempted
16. Any examination entry form submitted after deadline shall be liable for penalty regardless of the time payments were made.
17. Please note that, fee for processing examinations entry is Tshs 20,000/= which should be paid to NBAA and not to the Tutition providers.