THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF FOREIGN AFFAIRS AND EAST AFRICAN COOPERATION
DR. SALIM AHMED SALIM CENTRE FOR FOREIGN RELATIONS.

Tel. No. +255 22 2851007
Fax No. +255 22 28510
E- mail: dcfr@cfr.ac.tz
Website: www.cfr.ac.tz

P. O. Box 2824,
Kilwa Road,
Dar es Salaam,
Tanzania.

GA512/513/01/116[a]

10th September, 2026

Dear ……..
Reg……

RE: ADMISSION TO MASTERS PROGRAMME IN STRATEGIC GOVERNANCE (MA-SG-NTA LEVEL 9) FOR THE ACADEMIC YEAR 2026/2027

We are pleased to inform you that you have been selected to study the above-mentioned program for the Academic year **2026/2027**. Congratulations.

You are required to report for registration on **19th October, 2026**. Please bring with you your recent un-edited original certificates together with photocopies. (The originals will be returned right away after verification). Classes will commence on **26th October,** while the deadline for registration is **2nd November, 2026.**

The Centre **does not offer accommodation services**. You are therefore, advised to look for an alternative accommodation elsewhere during your study period. Attached to this letter is: a student particulars form, , medical report, dress code and fee structure.

Take note that, 60% of the Tuition fee **(3,480,000/=)** and the Direct cost **(255,000)** must be paid **before Registration deadline** and 40% **(2,320,000/=)** be paid before commencement of second semester. Direct costs include registration fee, identity card, caution money, NACTVET fee, library fee, student's union, sports and games and graduation cost.

All payments should be made via Control number generated at the Center (During Registration and Orientation process).
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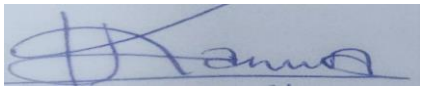
Once again, I extend my congratulations on your admission to the Centre for Foreign Relations and welcome to the CFR family.



Dr. Juma Mabasa Kanuwa
Ag. DD-ARC

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STUDENT PARTICULARS FORM

1. PROPOSED STUDY:

☐ Technician Certificate/Ordinary Diploma in International Relations and Diplomacy: Regular/Evening

☐ Bachelor Degree in International Relations and Diplomacy: Regular/Evening

☐ Bachelor Degree in Governance and Strategic Leadership: Regular/Evening

☐ Postgraduate Diploma in Peace Conflict and Diplomacy: Evening

☐ Postgraduate Diploma in Economic Diplomacy: Evening

☐ Postgraduate Diploma in the Management of Foreign Relations: Evening

☐ Master in Strategic Governance

2. PERSONAL DETAILS:

First name ……..…….... Middle name ……..

Last name …….
(*Names should be written as they appear on your CSEE certificate/statement)*

Date of birth ……

Nationality ……..

Sex Female ☐ Male ☐

Permanent address ……..……

Telephone ……..…

E-mail ……...……..……

Present address ……

3. NEXT OF KIN:

Name of next of kin: ……..…….
Relationship: ……...…….
Occupation: ……
Address: ……..……..…….…….
Telephone: ……
E-mail: ……..……...……

4. EDUCATION QUALIFICATIONS:

O-**LEVEL** (WRITE ONLY SUBJECTS WITH CREDITS i.e. D and above)

INDEX NO.	SUBJECT	GRADE	YEAR	DIVISION

A-LEVEL (WRITE ONLY SUBJECTS WITH Principals and Subsidiary)

OTHER QUALIFICATIONS: (Degree, Advanced Diploma, Diploma, Certificate)

INDEX NO.	SUBJECT	GRADE	YEAR	DIVISION	

COLLEGE/UNIVERSITY			
PROGRAMME		**COLLEGE**	

4. DISABILITY/SPECIAL NEEDS:

The Centre realizes that some members of the community have special needs. The information you provide will not affect judgments concerning your academic suitability and will be treated confidentially.

Do you have any disability ☐ YES ☐ NO

If yes, please provide further details in the space below:-

……

6. DECLARATION

In the event of, and in consideration of the Centre accepting me as a student, I hereby undertake to pay, as and when due all Centre fees. I understand that the payment of tuition fees be made in advance or at registration. I certify that I enjoy good health and that I am not now suffering from any disease likely to interfere either with studies or with the health of other students.

I hereby certify that all the above information is correct and complete, and I desire to apply for admission as a student of the Centre and declare that, if admitted, I undertake to conform to all the Rules and Regulations of the Centre for Foreign Relations.

Signature of the applicant……..

Date……...…

APPLICATION CHECK LIST

This application form should be returned accompanied with:

- ☐ Filled Admission Forms
- ☐ Medical Report Form
- ☐ Passport size recent photographs (2)
- ☐ Certified copy of Certificates, Form Four, Form Six, Diplomas or University degrees
- ☐ Birth Certificate
- ☐ Letter of confirmation for Sponsorship

APPLICATION SUBMISSION

Deputy Director Academic, Research and Consultancy
Dr. Salim Ahmed Salim Centre for Foreign Relations
P.O. Box 2824
DAR ES SALAAM.

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MEDICAL REPORT

FULL NAME: ……
SEX: …….. AGE: ……
HEIGHT: …….. WEIGHT: ……

Medical Examiner is requested to provide categorical answers to the following:-

		YES	NO			YES	NO
1.	Any eye trouble	☐	☐	9.	Diabetes	☐	☐
2.	Haemorhoids	☐	☐	12.	Cancer	☐	☐
3.	Kidney or bladder trouble	☐	☐	13.	Operations	☐	☐
4.	Skin Disease	☐	☐	14.	Accidents	☐	☐
5.	Venereal Diseases	☐	☐	15.	Physical defect	☐	☐
6.	Stomach trouble	☐	☐	16.	Lung or chronic cough	☐	☐

17. Eye:- Conjunctive …… Pupils ……

Sight: Without Glasses Right …… Left ……...
With Glasses Right …… Left ……...

18. Respiratory System ……....
19. Cardio Vascular …….. Pulse ……..
Blood Pressure: Systolic …… Diastolic ……...
20. Any clinical evidence of hyperacidity or gastric ulcer ……
21. BLOOD VDRL……. Haemoglobin……Leucocytes ……..……
Neutrophils …….. Lymophocytes ……...
Resophil…… Eosmophiles ……..
Monocytes ……. Blood Group …….

22. Eythrocyte Sedimentation Rate

23. CHEST X-RAY
The heart size ……
The lung field ……
Thoracic cafe ……
Conclusions ……

ELABORATE ON POSITIVE FINDINGS

I certify that MR/MRS/MISS ……

Is FIT/UNFIT to undertake studies at the Centre for Foreign Relations, Dar es Salaam. (cross whichever is appropriate in).

DATE: ……

PLACE: ……....

MEDICAL EXAMINER'S SIGNATURE: ……

QUALIFICATIONS: ……..

ADDRESS: ……

TELEPHONE: ……

F.3 Dress Code

F.3.1 The dress code of the Centre for Foreign Relations shall be observed at all time. The dress code shall be black or dark blue Kaunda suit or western suit, white shirt of long sleeve, long neck tie of similar color, black or brown leather closed shoes and black socks.

F.3.2 It shall be the responsibility of each student to have at least two pairs of the described uniform made by the tailor of their choice.

F.3.3 A dress of whatever design which does not cover sensitive parts of the body above the knees, stomach, breasts, waist and/or back, being trousers of whatever design or style, skin tights and/or with transparent materials, being a dress, which is too tight and/or with larger opening of slits showing the body above the knees is strictly prohibited in the Centre's premises and occasions.

F.3.4 A dress of whatever design which does not cover sensitive parts of the body above the knees, chest stomach, and armpits, being short trousers of whatever design or style, trousers which are so tight and/or loosely hanging below the waist is strictly prohibited in the Centre's premises and occasions.

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FEE STRUCTURE FOR 2026/2027 (60% BY 40%)

	NTA L 4	NTA L 5	NTA L 6	NTA L 7 (1ST YR)	NTA L 7 (2ND YR)	NTA L 8 (3RD YR)	PGDs	NTA L 9 MASTERS
CITIZENS	**1,560,000**	**1,560,000**	**1,560,000**	**2,005,000**	**1,985,000**	**2,055,000**	**3,520,000**	**6,055,000**
PAYMENTS								
DIRECT COST	250,000	250,000	250,000	205,000	185,000	255,000	220,000	255,000
60% INSTALMENT	786,000	786,000	786,000	1,080,000	1,080,000	1,080,000	1,980,000	3,480,000
TOTAL PAYABLE IN 1ST SEMESTER	**1,036,000**	**1,036,000**	**1,036,000**	**1,285,000**	**1,265,000**	**1,335,000**	**2,200,000**	**3,735,000**
40% INSTALMENT	524,000	524,000	524,000	720,000	720,000	720,000	1,320,000	2,320,000
TOTAL PAYABLE IN 2nd SEMESTER	**524,000**	**524,000**	**524,000**	**720,000**	**720,000**	**720,000**	**1,320,000**	**2,320,000**
TOTAL FEES PER YEAR	**1,560,000**	**1,560,000**	**1,560,000**	**2,005,000**	**1,985,000**	**2,055,000**	**3,520,000**	**6,055,000**
Fee for all programmes	**1,310,000**	**1,310,000**	**1,310,000**	**1,800,000**	**1,800,000**	**1,800,000**	**3,300,000**	**5,800,000**
Direct cost for all programmes	**250,000**	**250,000**	**250,000**	**205,000**	**185,000**	**255,000**	**220,000**	**255,000**

NB: NHIF = 50,400/= (For those without health insurance cards)