

PROCUREMENT AND SUPPLIES PROFESSIONALS AND TECHNICIANS BOARD
(Made under Regulations 11 (6) and 16(1))
**APPLICATION FOR REGISTRATION AS PROCUREMENT AND SUPPLIES
 PROFESSIONAL/ TECHNICIAN**



The Executive Director
 Procurement and Supplies Professionals and Technicians Board
 P.O. Box 5993
DAR ES SALAAM

Attach your signed,
 stamped passport
 photograph here

SECTION A: PERSONAL DATA

(All applicants are to complete this section)

First name: Middle Name Surname.....
 Marital status:.....
 Place of Birth: Nationality.....
 Date of Birth:.....
 Gender (Female/Male):.....
 Address:
 Phone..... Fax: E-Mail:

Next of kin or nearest contact person:

Name:
 Address:
 Phone..... Fax: E-Mail:

Application for registration as
 Previous registration with Board: Reg. No. Date Registered.....

SECTION B: ACADEMIC/PROFESSIONAL QUALIFICATIONS

S/N	School/Institution	From	To	Awards

SECTION C: EMPLOYMENT RECORDS

S/N	Employer	From	To	Designation

SECTION D: CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD) RECORD: Workshop/Seminar attended/Activity done

S/N	Workshop/seminar/Activity Title	From	To	Evidence

SECTION E: REFERENCE:

(Each proposer and supporter mentioned hereunder should be given a reference form to fill)

- (I) Name and addresses of proposers (two procurement and supplies professionals registered in the **Authorized or Approved category** and one senior officer from any field) **(FOR APPLICANTS WHO ARE NOT EMPLOYED).**
- (II) Name and addresses of supporters: **(Chief Executive Officer/Employer, Human Resource Personnel and immediate boss) (FOR APPLICANTS WHO ARE EMPLOYED).**

S/N	NAME	TITLE	REG. NO	ADDRESS/TELEPHONE/E-MAIL
1				
2				
3				

NB: Reference forms are available at PSPTB website (click to downloads)

SECTION F: APPLICANT'S STATUTORY DECLARATION

Ido hereby declare on thisday of20.....that I am the person who is applying for registration as a Procurement Professional/Supplies Professional/Technician and I am holding the above qualification and that the information I have given is true and correct to the best of my knowledge and belief.

Signature..... Date:

SECTION G: CERTIFICATION: (to be certified by Advocate/Magistrate/Notary Public)

I certify that I have compared the photograph in application form shown to me this day of20..... by with his/her application before me and that in my opinion it is true and faithful likeness and I am satisfied that the application before me is the person to whom the photograph and applications relates.

Name:

Qualification:

Signature:

Address:

SECTION H: ATTACHMENTS AND PAYMENT DETAILS

Curriculum Vitae (CV), certified copies of certificates, 4 passport photographs and pay in slip of application fees must be submitted with application form. All fees paid are non-refundable. For payment process please **call +255 737157312** to obtain Control Number and registration enquiry call number **+255 738 441 971** during office working hours from 8:00 am to 4:00 pm. Application fee for **Graduate, Full Technician and Technician Categories** is **TShs. 40,000/=**, **Fellow, Authorized and Approved Categories** is **Tshs. 50,000/=** **Affiliate Category** is **TShs 100,000/=** and **Foreigners** is **USD 400**.

NB: This form should be filled by the applicant only except for Section "G" and "I"

SECTION I: FOR OFFICAL USE ONLY

Documentary evidence attached

Date application was received..... Received and verified by.....

Registration fee received Receipt No..... Signature

Forwarded by Director of Prof. Development.....

Qualified/not qualified for registration - Reason

.....

.....

.....

.....
Chairman of the Board

.....
Executive Director of the Board

Date:

Date: