OUTREACH CARE INTERNATIONAL

P. O. Box 1534 DODOMA - Tanzania.
Email: outreachcare.tz@gmail.com
Tell: 0622 256 656 / 0755 844 236 / 0784 877 444

APPLICATION FORM

Photo

Sur Name: ..... Other Names .....

Date of Birth: ..... Place of Birth: .....

Mailing Address:

City..... Postal Code ..... Telephone.....
E-mail address: .....
Marital Status: ☐ Married ☐ Single ☐ Engaged ☐ Separated ☐ Divorced
☐ Re-married ☐ Widowed
Gender: ☐ Male ☐ Female. Name of Spouse: .....

Educational Background:

Name of Primary School: .....
Name of Secondary School ('O' Level): .....
Name of High School ('A' Level): .....
Higher Education: List College(s) and type(s) of degree(s) Held with dates:
(a) Certificate ( ) - (b) Diploma ( ) - (c) Bachelor Degree ( ) – (d) Masters Degree ( )
(e) Doctorate Degree ( )
.....
.....
.....

College or Specialized Training:

☐ Yes ☐ No. Country: .....
Institute Studied: .....
Courses Studied: .....
What type(s) of Ministry/Organization are you presently involved in? (Be Specific)
.....
.....

What are your Ministry/Organization goals?
.....

Religion: .....

What is your contribution to the community and how do you value your contribution? *(If your information does not fit on the provided space below, please add an attachment, named "My Contribution", for this field*).
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.....

Outreach Care International partners and collaborates with other International Institutions in offering academic studies. Please identify and select your preferred choice from amongst the list.

☐ Cornerstone International Bible College - USA
☐ Leadership International Ministerial Academy - LIMA
☐ In His Name Bible College - USA
☐ His Holy Word Bible College – USA

Courses Offered by our Partner Institutions & Universities:

(Please select one according to your Qualifications)

☐ Diploma in Bible Studies and Community Development
☐ Bachelor of Arts Degree in Bible Studies and Community Development
☐ Master of Arts Degree in Social Work
☐ Master of Arts Degree in Church Management
☐ Master of Arts Degree in Bible Studies and Community Development
☐ Master of Arts Degree in Community Development
☐ Master of Arts Degree in Leadership & Counseling
☐ Master of Arts Degree in Conflict Resolution
☐ Doctor of Philosophy in Church Management
☐ Doctor of Philosophy in Conflict Transformation
☐ Doctor of Philosophy in Humanity
☐ Doctor of Philosophy in Leadership & Counseling
☐ Doctor of Philosophy in Community Development
☐ Doctor of Philosophy in Leadership & Peace Counseling
☐ Doctor of Philosophy in Education Administration
☐ Doctor of Philosophy in Christian Education
☐ Doctor of Philosophy in Human Resources Management
☐ Doctor of Divinity ☐ Doctor of Theology
☐ Doctor of Laws ☐ Doctor of Science

Employer's Address:

Contact Address: ……
☐ Yes ☐ No Employer's Name:……
Your Present Occupation: ……
Tel: No: ……..
Country of Operation: ……

I have attached two recommendations for Honorary Degree from my Referees who can testify that I have been involved in full time service for at least FIVE YEARS. ☐ Yes ☐ No.

How and where did you hear about **Outreach Care International**: ☐ Website, ☐ Alumni, ☐ Conference, ☐ Flyers, ☐ Friends

Referred by: (name) ……..

Have you ever been disciplined by any authority?

☐ Yes, ☐ No. If Yes please Explain:
……..
……..
……..

Have you ever been treated for *emotional/mental condition:* ☐ *Yes,* ☐ *No. If yes, explain:*
……..
……..

Have you ever been accused or found guilty of Child Abuse, Sexual molestation, misappropriation of funds, felony crimes, or inordinate affections (*including lesbianism or homosexual lifestyles*)?

☐ Yes ☐ No if yes explain:
……..

DECLARATION

I, …….. do hereby declare that, Outreach Care International reserves the right to deny or revoke the approval of my candidature if satisfied that my behavior or lifestyle is inconsistent with the morals of our society.

…… Date: ……

Applicant's Signature

Note:

Outreach Care International partners with a variety of Universities and other Institutions with higher learning similar goals as a bridge to eligible and qualified personnel to earn Honorary Degrees and offers Educational Sponsorship as well.

FOR OFFICE USE ONLY

Date Application Received: ……/……/20……..

Approved: ☐ Yes ☐ No. If No, give reason (s):

……

……

Degree Approved: ……..

Approving Officer's Signature: …….. Date: ……/……/20……