

MONITORING AND EVALUATION REGISTRATION FORM

Please fill this form as completely as possible to enable the training to cater and target your individualized needs as much as possible. Fill and return **physically** to Mount Meru University Arusha or scan and send it **electronically** to tunzo.mnzava@gmail.com

I. PERSONAL DETAILS

Names (As they will appear in your certificate):

Surname _____ other names _____

Gender: MALE FEMALE

Designation: Prof Dr (PhD) Dr Eng. Mr. Mrs. M/s Rev Hon

Place of residence: _____

II. CAREER DETAILS

Career: _____

Place of Work: _____

Position: _____

Are you involved with research? Yes always Yes Sometimes No

If Yes, what type? Social Sciences Scientific / Applied Science Academic Research

You are paid for this training by: Yourself *The employer / Sponsor

*If by your employer / Sponsor, please fill the form at the end

III. TRAINING AND KNOWLEDE DETAILS

What is your highest formal training?

Secondary Education Diploma level Undergraduate Post graduate

When did you finish your highest training?

More than 3 years ago 1-3 years ago Just finished

What MS Office Programmes are you conversant with?

MS Excel MS Words MS Access MS Power Point None above

IV. OTHERS

You own a computer (Laptop). It is

Windows operated Macintosh / Apple

Do you have SPSS installed? Yes No I don't know

Preferable Mode of payment for this programme (All payments are done in MMU Account)

50% advance before commencing and 50% after 1 week 100% advance before commencing

***DECLARATION BY THE EMPLOYER / SPONSOR (Please put a seal on the signature at the end)**

I _____ (The employer / sponsor) am

committed to pay the sum of _____ (In numbers) _____

_____ (In words)

for _____ (Name) as the training fee for _____

_____ Name of the Course)

Name _____ Signature _____ Date _____