

**AGREEMENT FOR ADMISSION INTO HUBERT KAIRUKI  
MEMORIAL UNIVERSITY**

This AGREEMENT is made on the..... day of .....2017 BETWEEN HUBERT KAIRUKI MEMORIAL UNIVERSITY of Post Office Box Number 65300, Dar es Salaam (hereinafter referred to as the "university") of one part.

AND

..... of P.O. Box ..... (Hereinafter referred to as the "student") of the other part.

AND WHEREAS the University enrolled a student to undergo MD/ BScN/ M.MED/MSW/MscPH..... Programme for a duration of three/ four/ five academic years, commencing on .....

AND WHEREAS the student is willing to accept such a place for the said purpose and for the terms hereinafter contained.

NOW THIS AGREEMENT WITNESSES as follows:

1. The University hereby covenants with the student as follows: -
  - a) To provide University education of the highest standard.
  - b) Not to terminate this agreement without good cause and prior notice to the student.
2. The student hereby covenants with the University as follows:-
  - a) To pay for her/his annual required fees herself/himself or sponsor in full amounting to Tshs/ USD ..... to cover tuition fees and any other expenses as stated in the fee structure (the fees for other academic years may be reviewed to suit the prevailing conditions).
  - b) As a condition to be admitted to the Hubert Kairuki Memorial University to be bound by the following terms during the whole duration of her/his studies:-
    - i) To adhere to the University Charter together with its rules, policies and procedures, students; rules and all other University guidelines.
    - ii) To cater for his/her transport to and from the university during the holidays.
    - iii) To be personally responsible for buying his/his own food.

- iv) To be allowed to continue with studies for the rest of the academic years only after passing appropriate examinations and payment of the required fees.
- v) If student personally decided to terminate studies and or due to the case of abrogation of university rules and regulation his/her fees will not be refunded.
- vi) To make sure that his/her sponsor pays in full the required fee and that any internal agreement between the sponsor and her will not alter his/her obligation to the university.
- vii) To be insured against major illness by the sponsor.
- viii) To abstain from any political activity or unlawful assembly.
- ix) To attend lectures, clinical duties and all university activities without failure.
- x) In case his/her performance is not satisfactory, then, the university authority may take an action against him/her ranging from the repetition of a year or complete discontinuation from the University.
- xi) Not to reveal confidential reports of the patients or hospital during or after completion of his/her studies.
- xii) To replace any university property damaged or destroyed by her/him accordingly.
- xiii) To observe and respect the nursing and medical ethics, the University Constitution and the Hospital standing orders.

3. The university and the student mutually agree as follows:-

- a) During the duration of this agreement each party may terminate this agreement by issuing a 21 days notice to the other party, unless it is an act of great misconduct on the part of the student where further stay at the university endangers the rest of the university or hospital community. In such a case, 24 hours notice will be given.
- b) Any amendment or changes to this agreement shall be agreed by both parties and shall appear to this agreement as annexes.
- c) Should there arise any complaint or dispute from either party, then such a dispute shall be amicably settled by the parties through reconciliation by the university bodies as set out in the university Constitution.

d) This agreement will be governed by the Tanzania laws.

IN WITNESS WHEREOF the parties hereto have set their hands on the day and year first above written.

SIGNED for and on behalf of the said HUBERT KAIRUKI MEMORIAL UNIVERSITY by (the university):

Name: SIIMA KAIRUKI MUJEMULA

Signature: \_\_\_\_\_

Address: P.O. Box 65300  
Dar es Salaam, TANZANIA

Position: CORPORATE COUNSEL

Date: \_\_\_\_\_

SIGNED AND DELIVERED by (the student):

Name: \_\_\_\_\_

Signature \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_