

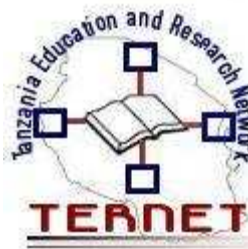
TANZANIA EDUCATION AND RESEARCH NETWORK (TERNET)
Office of the Executive Secretary

Contacts:

Mobile: 0754-766762

E-mail: ternet@out.ac.tz

Website : www.ternet.or.tz



P.O. Box 95062,
Kawawa Road,
Dar es Salaam, Tanzania

APPLICATION FORM FOR TERNET MEMBERSHIP

The Information you supply will be held and processed in TERNET SECRETARIAT databases and used to implement and support your TERNET connection.

It will not be supplied to any external body for any other purpose. It will not be used by TERNET for any other purpose. The TERNET Trust and Funding Councils may request this information for auditing purposes.

TERNET SECRETARIAT

P.O BOX 95062,

Dar-es-salaam,.

E-mail: ternet@out.ac.tz

Tel: +255-754-766762 +255-786-550043

http:// www.ternet.or.tz

This form should be completed by the institution requesting membership and returned electronically to the **TERNET SECRETARIAT**.

If it is not possible to complete the form electronically, please ensure that the answers are written in capitals to reduce the chance of transcription errors.

If you have any questions or comments about this form or would like some assistance when filling it in, please contact **TERNET SECRETARIAT** directly using the above contact addresses.

All TERNET members pay Tanzanian Shillings one million five hundred thousand only (Tshs. 1,500,000) as a one time membership fees and annual subscription starting from Tanzanian Shillings five hundred thousand (Tshs.500,000) to two million five hundred thousand(Tshs 2,500,000).

Form completed by:

Name:

Position:

Date:

[Check list:](#)

Section	Description	To be completed by	Completed (please tick)
Section 1	Institution or Organisation	Institution	
Section 2	Computer Infrastructure	Institution	
Section 3	Immediate Neighbourhood	Institution	
Section 4	Declaration	Institution	
Section 5	For Official Use	TERNET SECRETARIAT	

Section One: The Institution

Please provide details of the Institution requesting membership.

Institution:

The full name of your institution.

Telephone-no:

*Telephone number for the institution. Specified as:
<area code> <telephone number>*

Fax-no:

Optional (telephone number specified as above).

E-mail:

The e-mail address of the institution.

Location:

The province and district where the institution is situated

CONTACT PERSONS:

Administrative contact details (if not as above)

Name:

Telephone no:

Fax no:

E-mail address:

Technical contact details (if not as above)

Name:

Telephone no:

Fax no:

E-mail address:

RESOURCES AVAILABILITY:

Please provide details of availability of the following resources in your institution and its neighbourhood.

Telephone/Fax:	<input type="text"/>
	<i>Are telephone and fax lines available in your institution and its immediate neighbourhood?</i>
Electricity:	<input type="text"/>
	<i>Is Electricity available in your institution and its immediate neighbourhood?</i>
Water:	<input type="text"/>
	<i>Is Water available in your institution and its immediate neighbourhood?</i>

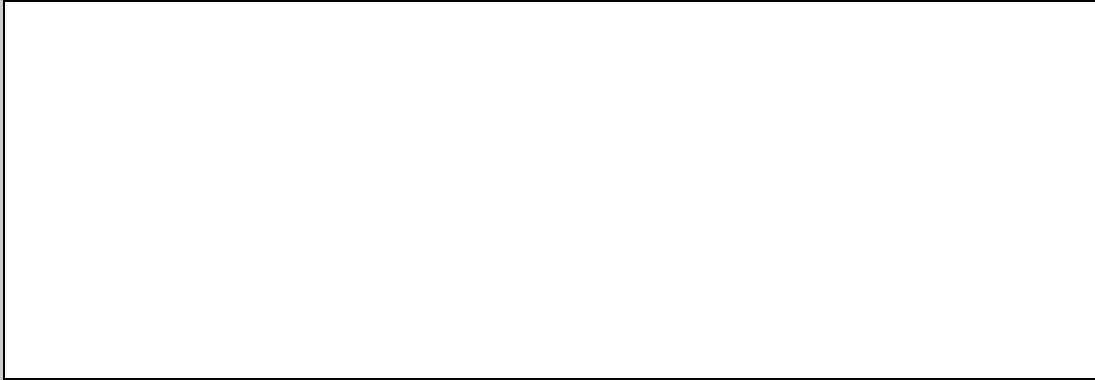
Section Two: Computer Infrastructure Availability

Please provide details of your Computer Infrastructure Availability.

Computer Labs:	<input type="text"/>
	<i>How many computer labs does your Institution have?</i>
Computers Per Lab:	<input type="text"/>
	<i>Averagely, how many computers does each of the above labs have?</i>
Servers:	<input type="text"/>
	<i>How many Servers do you have?</i>
Switches:	<input type="text"/>
	<i>How many Switches do you have?</i>
Routers:	<input type="text"/>
	<i>How many Routers do you have?</i>
LAN:	<input type="text"/>
	<i>Do you have a LAN?</i>
Internet Connectivity:	<input type="text"/>
	<i>How do you connect to the Internet currently?</i>
Internet:	<input type="text"/>
	<i>What is your general use of the Internet?(eg distance learning, communication..)</i>

Organisational Structure

Please provide details of the structure of your organisation.



Please provide details of any special circumstances that will assist in assessing the request.



Section Three: Immediate Neighbourhood

Please provide details of availability of the following institutions in your immediate neighbourhood.

Primary Schools:

How many Primary schools are located within a 50km radius from your institutions? (Give an approximate number)

Secondary Schools:

How many Secondary schools are located within a 50km radius from your institutions? (Give an approximate number)

Post Secondary Institutions:

How many Primary schools are located within a 50km radius from your institutions? (Give an approximate number)

Section Four: Declaration

I confirm that:

- (a) my institution will comply with the terms of the TERNET's Terms of Service and Security Policy, which may be re-issued from time to time;
- (b) all relevant fees for Membership and Connection to the Internet will be paid by the due date(s);
- (c) TERNET is indemnified for any and all losses caused by improper use of the facilities granted to the institution registering under this licence as a result of this application;
- (d) the information given above is true to the best of my knowledge and belief.

Signed by:

Name:

Position:

Date:

Section Five: For Official Use.

----- For official use only -----

Implementation Grouping Reference

(Group type) (Group No) (Phase)
