



REVOLUTIONARY GOVERNMENT OF ZANZIBAR

SECOND VICE PRESIDENT'S OFFICE

SECRETARY,
ZANZIBAR RESEARCH COMMITTEE,
P O BOX 239,
TEL: 024 2230806
FAX 024 22 30806
ZANZIBAR.

Picha ya
Karibuni
(Current
Passport size)

PHOTO
(3 copies)

RESEARCH/FILMING APPLICATION FORM

(Permit is only applicable in Zanzibar for a specified duration)

REQUEST FOR

Section A, B and G to be filled by applicant

Section C to be filled by affiliating Institution

Section D to be filled by Tanzania Police force - Zanzibar Police Office

Section E to be filled by Immigration Department - Zanzibar Immigration Office

Section F to be filled by The Second Vice President's Office

1.0. SECTION A

1.1. Name _____

1.2. Sex _____

1.3. Date and Place of Birth _____

- 1.4. Nationality _____
- 1.5. Country of Residence _____
- 1.6. Home Address _____
- 1.7. Passport Number _____
- 1.8. Date and Place of Issue _____
- 1.9. Expiry date _____
- 1.10. Visa obtained from _____
- 1.11. Date of arrival in Zanzibar _____
- 1.12. Duration of Stay _____
- 1.13. Expected date of departure _____
- 1.14. Contact address in Zanzibar _____
- 1.15. Local Referee/Affiliating Institution _____

2.0. SECTION B

- 2.1. Academic background

- 2.2. Professional background

- 2.3. Research title

2.4. Location of requested assignment

2.5. Purpose and objective of the assignment _____

2.6. Sponsor of your assignment _____

2.7. Full address of Sponsor _____

Email Address _____

3.0. SECTION C (AFFILIANT INSTITUTION)

Remarks: Affiliating/Facilitating Justification on how the Zanzibar will benefit from the Research.

3.1. Name and Title of authorizing Officer _____

3.2. Name of Institution _____

3.3. Signature and Seal _____

4.0. SECTION D (POLICE CLEARANCE FOR FOREIGNER)

I hereby certify that, the fingerprints of
Citizen of Passport No.
..... has been taken for the records. Made on this.....
..... Day of Year.....

- 4.1. Name of the authoring Officer _____
- 4.2. Station _____
- 4.3. Address _____
- 4.4. Signature and Seal _____

5.0. SECTION E (IMMIGRATION CLEARANCE FOR FOREIGNER)

This section has to be filled by the Immigration Department, Zanzibar Office after the completion of immigration procedures related to the application for research permit.

I certify that the applicant has met the entire requirement and his/her application is on process to be approved.

- 5.1. Name of the authorizing Officer _____
- 5.2. Address _____
- 5.3. Signature and Seal _____

6.0. SECTION F (THE SECOND VICE PRESIDENT’S OFFICE)

This is to confirm that I have received and duly considered applicant request.

I am satisfied with the information out lined in Section A, B, C, D, E and G.

- 6.1. Name of the authorizing Officer _____
- 6.2. Institution _____
- 6.3. Address _____
- 6.4. Signature and Seal _____

7.0. SECTION G: (APPLICANT)

Applicant should consider the following:

- i. Research proposal should be submitted with the applicant’s forms.
- ii. For a research exceeding three months you will be required to submit progress report.
- iii. Three (3) copies of the final report should be submitted to the Office of the Chief Government Statistician.
- iv. No permit will be granted to research/filming on the restricted areas.
- v. Not allowed to engage on any other activity apart from your research.
- vi. For all research permit fees and charges please found attached document of this form.
- vii. Failure to comply with the above requirements your research permit will not be permitted.

APPLICANT’S DECLARATION:

I agree to comply with all terms and conditions stated in this form and which may be stated in connection with any permit granted to me as a result of this application.

I understand that my permit will be cancelled if any information is proved to be false and other legal measures has to be taken.

I..... certify that all information on this application is true and correct to the best of my knowledge and ability.

Signature _____
(Applicant)

Date _____