

# THE TEACHING COUNCIL OF ZAMBIA

## STUDENT TEACHER'S INDEXING APPLICATION FORM

### 1. PARTICULARS OF THE INSTITUTION *(write or tick where necessary)*

S/n	Particulars of Institution	Please Complete
1.1	Name of Institution	
1.2	Institution's TCZ Number	
1.3	Status of Institution <i>(Tick appropriate)</i>	Early Childhood
		Primary
		Secondary
		Combination
		University
		In-service
1.4	Agency <i>(Tick appropriate)</i>	Public
		Private
		Faith-Based
		Grant-Aided
		Other (specify)

### 2. STUDENT'S PARTICULARS

2.1	Personal Information	Please Complete
2.1.1	Surname	
2.1.2	First Name	
2.1.3	Other Names	
2.1.4	Date of Birth	
2.1.5	Gender	
2.1.6	NRC Number	
2.1.7	Student Computer/Identity Number	
2.1.8	Home Postal Address	
2.1.9	Mobile Numbers	
2.1.10	Email Address	
2.2	Next of Kin	Please Complete
2.2.1	Surname	
2.2.2	First Name	
2.2.3	Relationship	
2.2.4	Residential Address	
2.2.5	Postal Address	
2.2.6	Occupation	
2.2.7	Mobile Numbers	

**3. ACADEMIC PROGRESSION**

S/n	Level	Year of Entry	Year of Completion
3.1	Early Childhood Education		
3.2	Primary Grade 1 to 7		
3.3	Junior Secondary Grade 8 to 9		
3.4	Senior Secondary Grade 10 to 12		
3.5	GCE		
3.6	First College of Education		

**4. PREVIOUS ENROLMENTS**

- 4.1. Have you been enrolled to any college before? Yes ☐ No ☐
- 4.2. If yes state the programme and give details .....
- .....
- 4.3. Are you currently studying at any other institution? Yes ☐ No ☐
- 4.4. If yes state the programme and give details:.....
- 4.5. Have been indexed before in a previous college? Yes ☐ No ☐
- 4.6. If yes write previous index number.....

**5. CURRENT PROGRAMME OF STUDY**

S/n	Current Programme of Study	Please Complete
5.1	Name of Programme	
5.2	Level of Programme (e.g. Diploma)	
5.3	Duration of Programme	
5.4	Expected Year of Completion	
5.5	Mode of Study (e.g. Full Time)	

**6. SPECIAL EDUCATIONAL NEEDS**

- 6.1. State type of Special Education need(s) that you have if any.....
- .....

**7. SUPPORTING DOCUMENTS**

Attach certified copies of your National Registration Card and academic qualifications, (and professional qualifications if any)

**8. DECLARATION**

I, ..... (*full names*) do hereby apply for student-indexing to the Teaching Council of Zambia during the course of my Teacher-Training. I declare that the information on this form is true and correct.

I further declare that I shall abide by the regulations prescribed by the Teaching Council of Zambia for the validity of my indexing. I understand that I shall not proceed on School Experience (Teaching Practice) without a valid School Experience practicing Certificate. In the event that I breach this declaration, the Teaching Council of Zambia may revoke my practicing certificate.

**Signature:**.....**Date:**.....

**RECOMMENDATION BY COLLEGE PRINCIPAL**

Recommended/Not Recommended

Comment .....  
.....

Name:.....

Signature:.....

Official Stamp

**APPROVAL BY THE TEACHING COUNCIL OF ZAMBIA**

Approved/Not Approved

Comment .....  
.....

Name:.....

Signature:.....

Official Stamp