HALMASHAURI YA WILAYA YA NZEGA

**SHULE YA SEKONDARI ITOBO,**

**S. L. P 540,**

**NZEGA.**

**Tarehe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**Kumb.na:ITBSS/F.1/2021**

Jina la mwanafunzi: ........................................................

S. L. P .............................................................................

**YAH: MAAGIZO YA KUJIUNGA NA SHULE YA SEKONDARI ITOBO**

**1.0: UTANGULIZI:**

Ninafurahi kukutaarifu kwamba umechaguliwa kujiunga na kidato cha kwanza katika shule hii. Shule ya Sekondari Itobo ipo eneo la Nyasuli katika kijiji cha Itobo.

Mhula wa kuanza masomo utaanza tarehe **11.01.2021**. Unatakiwa Kuripoti Shuleni tarehe **11.01.2021**. Na mwisho wa kuripoti ni tarehe **18.01.2021.**

**2.0: MAMBO MUHIMU YA KUZINGATIA.**

**2.1: SARE YA SHULE:**

**a). SARE ZA DARASANI.**

WASICHANA: Uje na:-

* Shati nyeupe mikono mifupi.
* Sketi rangi nyeusi ivuke magoti, la sivyo utashona nyingine.
* Soksi nyeupe.
* Wanaovaa hijabu iwe nyeupe.
* Viatu vyeusi vya ngozi vya kufunga kwa kamba na visiwe na visigino virefu.
* T – Shirt 2 za rangi ya njano zenye nembo ya Itobo Sekondari.

WAVULANA: Uje na;-

* Shati nyeupe mikono mifupi.
* Suruali rangi nyeusi isiyobana la sivyo utashona nyingine.
* Soksi nyeupe.
* Viatu vyeusi vya ngozi vya kufunga kwa kamba na visiwe na visigino virefu.
* T – Shirt 2 rangi ya njano zenye nembo ya Itobo Sekondari.

**b). SARE ZA MICHEZO:**

WASICHANA:

* Uje na sketi ya michezo ya rangi ya kijani.
* Uje na bukta ya michezo ya rangi ya kijani.
* Uje na sweta la bluu la kuvaa wakati wa baridi, sio jaketi.
* Uje na raba za michezo.

WAVULANA:

* Uje na bukta ya michezo rangi ya kijani.
* Uje na T – Shirt ya michezo ya rangi ya kijani.
* Uje na viatu vya michezo.
* Uje na sweta la bluu la kuvaa wakati wa baridi, sio jaketi.

**2.2: VIFAA VYA DARASANI:**

* Uje na daftari 12 kubwa za kuanzia.
* Mkebe wa hesabu (mathematical set).
* Uje na kalamu na penseli zaidi ya moja.

**2.3: MATIBABU:**

**-** Utajigharamia matibabu uwapo shuleni mpaka hapo utaratibu wa kuchangia matibabu kwa Vikundi utakapoandaliwa kwa wanafunzi wasio na kadi za N.H.I.F .

**3.0: SHERIA NA KANUNI ZA SHULE HII:**

3.1: Shule inaendeshwa kwa mujibu wa Sheria Na. 10 ya mwaka 1978 na kama ilivyorekebishwa kwa Sheria Na. 10 ya mwaka 1995. Aidha, inazingatia miongozo yote inayotolewa na Wizara ya Elimu, Sayansi, Teknolojia na Mafunzo ya Ufundi, yenye dhamana ya elimu nchini na Ofisi ya Raisi – TAMISEMI yenye jukumu la usimamizi na uendeshaji Elimu. Unatakiwa kuzingatia mambo ya msingi yafuatayo ambayo yatafafanuliwa kwa maandishi na utapewa nakala yake mara baada ya kuripoti shuleni.

1. Heshima kwa Viongozi, Wazazi, Wafanyakazi wote, Wanafunzi wengine na jamii kwa ujumla ni jambo la lazima.
2. Mahudhurio mazuri katika kila shughulu ndani na nje ya Shule kulingana na ratiba ya Shule ni lazima.
3. Kushiriki kwa makini kufanya maandalio ya jioni (Preparation).
4. Kuwahi katika kila shughuli za Shule na nyingine utakazopewa.
5. Kufahamu mipaka ya Shule na kuzingatia kikamilifu maelekezo juu ya kuwepo ndani na nje ya mipaka hiyo wakati wote wa uwanafunzi wako katika Shule hii.
6. Kutunza usafi wa Mwili, Mavazi na Mazingira ya Shule.
7. Kuvaa sare ya Shule wakati wote unapotakiwa.
8. Kuzingatia ratiba ya shule wakati wote na
9. Kutunza mali za umma.

**3.2: Makosa yafuatayo yanaweza kukusababishia kufukuzwa au kusimamishwa Shule:-**

1. Wizi.
2. Uasherati na Ushoga.
3. Ubakaji.
4. Ulevi na matumizi ya Madawa ya kulevya kama vilebangi, cocaine, mirungi, kubeli na kadhalika.
5. Kupigana na Kupiga.
6. Kuharibu kwa makusudi mali ya umma.
7. Kudharau Bendera ya Taifa.
8. Kuoa au Kuolewa.
9. Kutoa mimba na kupata mimba.
10. Kugoma, kuchochea na kuongoza au kushiriki kuvuruga amani na usalama wa Shule au watu.
11. Kukataa adhabu kwa makusudi.
12. Kuwa na simu ya mkononi.

**4.0: Mambo mengine muhimu yanayopaswa kukamilishwa na kuwasilishwa Shuleni na Mwanafunzi**

1. Medical Examination Fomu ambayo itajazwa na Mganga Mkuu wa Hospitali ya Serikali. Fomu hii itakabidhiwa kwa Mkuu wa Shule mara utakaporipoti Shuleni.
2. Fomu ya maelezo binafsi kuhusu historia ya Mwanafunzi na Mkataba wa kutoshiriki katika migomo, fujo na makosa ya jinai.
3. Fomu ya Mzazi kukiri kukubaliana na Sheria, Kanuni na maelekezo mengine yatakayotolewa na Shule.

**5.0: Tafadhali soma kwa makini maelezo / maagizo haya na kuyatekeleza kikamilifu.**

KARIBU SANA KATIKA SHULE HII

.....................................................

**BENSON MWAIPUNGU JOHNSON**

**MKUU WA SHULE**

**SHULE YA SEKONDARI ITOBO**

**NZEGA**

**KIAMBATANISHO NA . 2**

**TAARIFA BINAFSI ZA MWANAFUNZI**

Unatakiwakujaza sehemu zilizoachwa wazi, aidha na kusoma kwa makini maelekezo yaliyoandikwa.

1. Jina la Mwanafunzi..........................................................................................................
2. Anuani yako kamili..........................................................................................................
3. Tarehe ya kuzaliwa, Mwezi na Mwaka ..........................................................................
4. Mahali ulipozaliwa ..........................................................................................................
5. Dini au Dhehebu .............................................................................................................
6. Uraia wako ......................................................................................................................
7. Jina kamili la Mzazi/Mlezi wako ....................................................................................
8. Anuani ya Mzazi/Mezi ....................................................................................................
9. Namba ya Simu ya Mzazi/Mlezi ....................................................................................
10. Mahali anapoishi,

Kijiji ................................ Mtaa ................................. Kitongoji ..................................

Kata ............................... Wilaya ............................... Mkoa .......................................

**AHADI:**

Mimi .................................................................................................. kwa utashi na akili yangu

Timamu ninaikubali nafasi ya masomo niliyopewa, nitakuwa tayari kujiendeleza kimasomo, ni mezisoma, nimezielewa na nitazifuata Sheria za Shule pamoja na kanuni na taratibu zitakazotolewa.

Natambua kuwa nikifukuzwa Shule kwa sababu ya kuvunja Sheria za Shule makusudi nitavunja MOyo wa Wazazi na wale wote wanaonisaidia, hivyo jamii itanidharau kabisa. Naahidi kuwa na utii kwa Walimu na Wafanyakazi wote waliopo hapo Shuleni ili wanipende na kunisaidia zaidi. Sitakuwa tayari kuanzisha kushauri wala kushiriki katika vurugu za aina yoyote hapa shuleni Shuleni hususani mgomo kwani ni kwenda kinyume na Sheria na taratibu za Shule. Nitakuwa na utii na Viongozi wa shule na Upendo kwa Wanafunzi wenzangu wote. Pia nitafanya bidii katika masomo na kazi zote za Shule.

**MUNGU NISAIDIE**

**........................................................... .................................. ...............................**

JINA LA MWANAFUNZI SAHIHI YA MWANAFUNZI TAREHE

**HALMASHAURI YA WILAYA YA NZEGA**

**SHULE YA SEKONDARI ITOBO**

**FOMU ITBSS/FI/C**

**FOMU YA TAMKO LA MZAZI KUKIRI KUKUBALIANA NA SHERIA,KANUNI NA MAELEKEZO YA SHULE.**

Sehemu hii ijazwe na Mzazi/Mlezi

1. Jina la Mzazi/Mlezi\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Anuani ya mahali unapoishi sasa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Namba ya simu inayoweza kutumika kukupata \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Mahali ulipozaliwa\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Kazi ya Mzazi/Mlezi \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Dini au dhehebu \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Uraia \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. **TAMKO.**
   1. Ninakubali nafasi aliyopewa Mtoto wangu\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Jina la mtoto)
   2. Nitashirikiana na uongozi wa Shule katika suala la kumlea, kumwendeleza na kutia moyo wa kupenda Shule Mtoto wangu.
   3. Nitamsaidia Mtoto wangu Mavazi na Vifaa vya Shule vinavyotakiwa.
   4. Nitachangia chakula cha mchana kwa Mtoto wangu kama ilivyoagizwa na kusisitizwa na serikali.
   5. Nitahakikisha kuwa Mtoto wangu anawahi shuleni na pia hachelewi likizoni.
   6. Nitafuatilia maendeleo yake kwa karibu zaidi ikibidi hata kuonana na walimu wake.
   7. Natambua pia kumchelewesha kufika Shuleni siku ya kufungua Shule na Mtoto wangu kuwa mtoro mara baada ya kuandikishwa kunaweza kusababisha mimi mzazi kuchukuliwa hatua na mamlaka zilizopo.
   8. Nitamruhusu/Nitamleta mwanafunzi kuripoti akiwa amekamilisha mahitaji yote ya Shule.
   9. Nimesoma na kutambua Sheria, kanuni na maelekezo muhimu ya Shule. Naahidi kumsaidia motto wangu kuzitekeleza na mimi naahidi kutimiza wajibu wangu.

**Nakutakia kazi njema**.

................................................................... ............................... ................................

**JINA LA MZAZI/MLEZI SAHIHI TAREHE**

**GOVERNMENT OF TANZANIA**

**MEDICAL EXAMINATION FORM:**

To Medical Officer.......................................................................................................................

Mr/Miss ................................................................................................................(Name in full)

Please examine the above named as to his/her physical and mental fitness for a Secondary education (Day school).

1. Blood count.....................................................................................................................
2. Stool examination ..........................................................................................................
3. Urine analysis ................................................................................................................
4. Venereal disease ...........................................................................................................
5. T.B and leprosy test .......................................................................................................
6. Eye sight ........................................................................................................................
7. Hearing .........................................................................................................................
8. Asthma ..........................................................................................................................
9. Epilepsy .........................................................................................................................
10. Neuroses .......................................................................................................................
11. Pregnancy (Girls) ..........................................................................................................
12. Speech ..........................................................................................................................
13. Limbs ............................................................................................................................
14. Other serious Disease ..................................................................................................

Remarks and additional information e.g. Physical defects or impairments, infection, chronic or family disease e.g. Sickle cell

........................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................

I certify that the above named student is fit/is not fit to pursue Secondary Education.

Signature...............................................................................

Designation.............................................................................

Station.....................................................................................

Date and Stamp........................................................................