



PUBLIC RELATIONS SOCIETY OF TANZANIA – PRST

P. O. Box 4111 Mwanza – Tanzania

Mob. +255 759 463652

Info@prst.or.tz

www.prst.or.tz

Excel from our Hands

ORDINARY MEMBERSHIP (NON - STUDENT APPLICATION FORM)

OBSERVATIONS

- **Qualification:** Public Relations/ Communication practitioners, Public Relations instructors/ lecturers from academic institutions and graduates in Public Relations field should use this form to apply.

Please furnish enclosed to this form certified copies of your qualifications corresponding to “Part C. 1&2” below.

An ordinary member should be aware of his/her rights, duties and termination or suspension of membership provisions under article 16, 17 and 18 of the constitution respectively.

- **Benefits:** View the benefits of becoming a PRST member from the website.
- **Fees:** The registration fee is Tshs 30,000/= and the annual membership fee is Tshs 50,000/=.

The fee is reviewed annually.

- **Payment:** The terms of fees payments are prepaid to membership approval. Bank Info: Name: CRDB Bank, Account name: PRST, Branch: Kijitonyama, Account No: 0150201322200. Submit your application form, scanned bank slip and other attachments (if required) to registration@prst.or.tz
- **Membership Duration:** Membership duration is from date of membership approval to date of renewal, which is annually.
- **Commitment:** All members are ought to agree to abide by PRST Constitution and Code of Conduct (Professional Ethical Standards) which should have been read before submitting your application.
- **Endorsement:** PRST may contact your current business area for endorsement of your application, prior to being granted membership.
- **The names that you provide will appear in all PRST correspondences.**
- **Type-in on filling the form in CAPITALS.**



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A. PERSONAL INFORMATION

Title First Name
Other Name Surname
Gender : Male Female
Date of Birth (DD/MM/YY) Nationality
ID Type No.
Postal Address
Mobile Email Address

**Applicant
passport
photograph
taken on white
background.**

*(Please attach your
Passport on the E-mail)*

B. BUSINESS INFORMATION (Currently working)

Name of Company/ Organization/ Institution
Business Industry Postal Address
Tel: Fax: Region
Email Website
Building/Block Area/Street

Brief description of Company/ Organization/ Institution activities

Job Title

For how long have you been practicing?

Indicate your occupational classification

Senior Management

Middle Management

Supervisory

Non-Management

Brief description of key responsibilities



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C. ACADEMIC QUALIFICATION *(Please send certified copies for 1&2 below as email attachments)*

1). Please provide your latest major academic qualification (e.g. BA, MA, PhD in)

Qualification.

Instructing Institute

Country

Duration

Year Completed

2). Other qualification if any (Training, Workshop)

Qualification

Instructing Institute/ Org

Country

Duration

Year Completed

D. WORKING EXPERIENCE (PR/Communication or any other, if any)

1). Company/ Organization/ Institution

Postal Address

Tel:

Email

Job Title

Duration

Brief description of key responsibilities

2). Company/ Organization/ Institution

Postal Address

Tel:

Email

Job Title

Duration

Brief description of key responsibilities



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E. REASON FOR JOINING PRST

To help us improve our services to members, please tell us your reason for joining PRST (30 words only)

F. COMMITMENT

I _____ (Names as given above), hereby apply for Ordinary Membership, Non-Student member with PRST. I confirm that the information given in this application is correct to the best of my knowledge, and I agree to abide by the PRST Code of Conduct. I enclose the joining fee which I understand is non-refundable accompanying this application.

By signing below, I agree / disagree to receive PRST's professional communication by electronic messaging i.e. Email & SMS.

Signature _____ OR _____

I AGREE _____ Date _____

Note: Upon opting to tick **I AGREE**, the tick sign is as binding as your signature would be.

G. FOR OFFICE USE ONLY

Application No. _____

Received on _____ Fees paid: Yes _____ No _____

Bank's Slip No _____

Registration Approved _____ Rejected _____ Granted Membership No. _____

Received by _____

Signature _____

Date _____