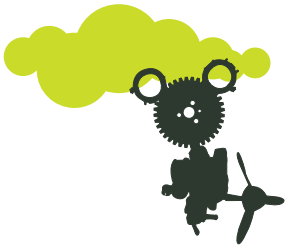

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Application for Admission

A. APPLICANT/STUDENT INFORMATION

SURNAME:		INITIALS:		TITLE:	
FIRST NAMES:					
IDENTITY NUMBER:					
SA CITIZENSHIP:	YES		NO		
NATIONALITY IF NOT SA:		PASSPORT NO:			
STUDY PERMIT NUMBER:		DATE OF BIRTH:			
DISABILITIES:	YES		NO	DETAIL:	
RESIDENTIAL ADDRESS:					
		POSTAL CODE:			
CONTACT DETAILS:	MOBILE:				
	E-MAIL:				

B. SECONDARY EDUCATION

All applicants must complete this section and submit a certified copy of their Senior Certificate.
If you have not yet passed Gr 12 please submit a certified copy of your latest report.

NAME OF SCHOOL:		
CONTACT NUMBER:		
SUBJECTS:	LIST OF SUBJECTS	MARK

C. TERTIARY EDUCATION

NAME OF INSTITUTION:			
DIPLOMA/DEGREE:		YEAR:	
SUBJECTS:	LIST OF SUBJECTS		MARK

D. PARENT/GUARDIAN/FEE PAYING PARTY INFORMATION

SURNAME:		INITIALS:		TITLE:	
FIRST NAMES:					
IDENTITY NUMBER:					
RELATIONSHIP TO STUDENT:					
OCCUPATION:		EMPLOYER:			
RESIDENTIAL ADDRESS:					
		POSTAL CODE:			
POSTAL ADDRESS:					
		POSTAL CODE:			
CONTACT DETAILS:	MOBILE:				
	TEL:				
	FAX:				
	E-MAIL:				