

SHORT COURSE APPLICATION FORM

NB: This form is only to be used when applying for a Certificate Programme/Course

General Information

Which programme do you wish to apply for:	
Commencing on:	
Where did you get information about this course? Mentioned the source name (e.g. Name of Newspaper, Media or Radio station)	

Personal Name

Surname	
First name/s	

Title (eg Mr, Mrs)		Date of Birth yr/mnt/dt							
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Population group	African	Coloured	Indian	White	Other:
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Details required by Government for Statistical Purposes

Home language		Gender	Male	Female
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Do you have South African citizenship?	Yes	No
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RSA ID number	
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Or

Passport number	
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Do you have any disabilities?	Yes	No	If yes, please state nature of disability
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Addresses/contact

Postal Address		Cellular Phone	
		Telephone	

Home Address		Fax	
	Post Code		

Work Address		Telephone	
		Fax	
	Post Code	Email address	

Next of Kin

Relationship		Title		Initials		Surname	Telephone
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Education background

Detail/name of qualification	Years registered for each qualification	Name of institution	Date of graduation
Name of last secondary school attended:-		Date completed:-	Subjects
Do you have a matriculation certificate (yes or no)			

Professional / work background

Name of Employer	Years at company	Position and level (please also indicate if you were in a management position)

Describe in detail the major responsibilities in your recent job

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Have you applied to other management Schools? Yes No

Funding / sponsor details

Who will be funding your studies	
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If a donor is funding your studies please provide the following details

Postal Address	Cellular Phone	
	Telephone	
Post Code	Fax	
Name of contact person:	email	
	Name	Signature
Signature or letter attached to confirm funding support		

Indemnity and undertaking**LEGAL DECLARATION OF INDEMNITY AND UNDERTAKING**

I, THE APPLICANT,

- (1) Acknowledge that the University does not accept responsibility for damage or loss in respect of property of the applicant or in respect of property brought onto University premises by the applicant.
- (2) Do hereby indemnify the University in respect of any damage caused by the applicant to University property or to the property of third parties, whether on or off the University premises, as a result of the applicant's actions either whilst on the University premises or whilst engaged in any activity related to the University.
- (3) Undertake, during the orientation period and for any period during which I am a registered student, to be bound by the rules and regulations of the University for the time being in force, including the rules and regulations of any University residence, club or society to which I may be admitted or become a member and by any requirements or conditions imposed by the University on me as a prerequisite to my registration as a student of the University in any faculty.
- (4) Certify that the information provided in this form and all supporting documentation is accurate and acknowledge that furnishing any false information may result in disciplinary proceedings being taken against the applicant.
- (5) Declare that I have furnished the University with all the information necessary to make an informed decision about my admission.
- (6) Undertake to pay unconditionally all fees, charges and equipment surcharges payable to the University as they fall due for payment, for any period for which I am or may become a registered student or the applicant is or may become a registered student of the University.

ALL APPLICANTS MUST SIGN BELOW – Thank you

Signature of applicant:.....

Date:...../...../.....

Office use

Application received on (date)	
Processed by (programme coordinator)	
Check min criteria met (programme coordinator)	
Academic Evaluation and decision	1. 2.
Decision letter sent (date)	
On database (date)	