INTRODUCTION

The North-West University (NWU) officially came into existence on 1 January 2004 following the merger of the University of North-West and the Potchefstroom University for Christian Higher Education and the incorporation of the Sebokeng Campus of the Vista University.

The University consists of three campuses: Vaal Triangle Campus, Mafikeng Campus and Potchefstroom Campus. The head office and seat of the institutional management are located in Potchefstroom.

The NWU is a value-driven institution that promotes tolerance and respect for all perspectives and belief systems in order to facilitate an environment conducive to teaching-learning, research and community service. The value system and practices of the NWU will be driven by the values enshrined in the Constitution, especially human dignity, equality and freedom. This includes the promotion of unity in diversity.

APPLICATION FEE

The prescribed application fee as determined annually by the Council is **not refundable**. The application form will only be accepted for processing if accompanied by this application fee (only cheques or postal orders in favour of the North-West University please).

SELECTION

1. Provisional selection for all undergraduate applications can be done on the basis of the grade 11 final examination marks (not symbols) if the applicant has not yet matriculated, or on the basis of the matriculation symbols as indicated on the certificate.

2. The University reserves the right to require of candidates who have not obtained a specific average pass mark, to write an additional selection test on the basis of which final consideration will be given to the application of such a candidate. Following receipt of applications for admission, candidates will be informed as to whether they are expected to write the selection tests and as to the date, time and venue.

3. Approval of applications further depends on post-school training and education and/or applicable work experience.

UNIVERSITY NUMBER

Please note that the allocation of a university number does not necessarily mean that you have been accepted as a student.

ALL CORRESPONDENCE TO*:

**VAAL TRIANGLE CAMPUS**
The Campus Registrar
North-West University (Vaal Triangle Campus)
PO Box 1174
1900 VANDERBIJLPARK, RSA
Tel: (+2716) 910-3111
Fax: (+2716) 910-3171
E-mail: ToelatingsAdmissionsVaal@nwu.ac.za

**MAFIKENG CAMPUS**
The Campus Registrar
North-West University (Mafikeng Campus)
Private Bag X2046
2735 MMABATHO, RSA
Tel: (+2718) 389-2111
Fax: (+2718) 392-5775

**POTCHEFSTROOM CAMPUS**
The Campus Registrar
North-West University (Potchefstroom Campus)
Private Bag X6001
2520 POTCHEFSTROOM, RSA
Undergraduate, Honours and Diplomas
Tel: (+2718) 299/4217/2635/2642/4047
Fax: (+2718) 293 2580/5205
E-mail: Toelatings-AdmissionsPotch@nwu.ac.za

* To facilitate data capturing, prospective students must request the appropriate application forms from the above-mentioned addresses.
LANGUAGE POLICY

The Council of the North-West University (NWU), in concurrence with the Senate, will develop a language policy that will be flexible, functional and that will promote multilingualism.

The policy will promote accessibility, integration and a sense of belonging. In line with this policy, each campus (i.e. Vaal Triangle, Mafikeng and Potchefstroom) will develop a campus language plan, which will take into account the language requirements of students and the language realities at ground level. For more information, please visit http://www.nwu.ac.za on the Internet.

A. GENERAL INFORMATION AND INSTRUCTIONS TO PROSPECTIVE STUDENTS

IMPORTANT

Read the following instructions and information carefully before completing the form. Incomplete information can lead to unnecessary delays in the processing of your application.

1. This application form should be completed by all who have not been registered at this University before or who have interrupted their studies for a year or longer.

2. The following documents should accompany this application (only certified copies are accepted):
   2.1. Undergraduate applicants:
   - Matriculation certificate (if already matriculated) (certified copies are accepted);
   - Academic record and certificate of conduct with regard to study at another tertiary institution (certified copies are accepted);
   - Copies of certificates obtained at another tertiary institution (certified copies are accepted);
   - Identity document (certified copies are accepted);
   - Vaccination certificate if the applicant suffers from the notifiable diseases tuberculosis (TB) or bacterial meningitis (please refer to A3 on page 3 of this application form).

   **All copies should be certified.**

   2.2. Postgraduate applicants:
   - Official proof of compliance with the prerequisites for the intended study;
   - Academic record and certificate of conduct with regard to study at another tertiary institution (certified copies are accepted);
   - Copies of certificates obtained (certified copies are accepted);
   - Identity document (certified copies are accepted).

   **All copies should be certified.**

**NB: If any of the above documents have been issued in the maiden name of married applicant, a certified copy of the marriage certificate should accompany this application.**

3. Please inform the University immediately should you:
   - Decide not to pursue this application for admission any further;
   - Change your address;
   - Not, within four weeks of sending in the application, receive an acknowledgement of receipt from the University.

4. The University reserves the right to refuse any application without supplying reasons for such a decision.

5. Population Group

   Although this information is vital for statistical purposes, answering is optional.

**NB: For further information with regard to the completion of the application form, consult the calendar or information guides.**

Policy documents, fees payable and financial regulations and all other rules and regulations of the University (hereafter referred to as the brochures) are available for purposes of information at www.nwu.ac.za

The Institutional Statute of the University, containing particular provisions with regard to students, degrees and discipline at student level, is available for purposes of information at http://www.nwu.ac.za/i_gm/index.html or at the office of the Campus Registrar.
A.1. Application Form

University number:  

During which year do you intend to commence your study at this University?  

Campus  

Have you been registered at this University before?  

If yes, please supply university number  

First year of registration (e.g. 1994)  

Method of learning that you will follow (mark with an x)  

A.2. Qualification

Qualification that you wish to enrol for:  

Second choice:  

A.3. Biographical Particulars of Applicant:

Identity number

Surname

Initials

Birth date  

Title (e.g. Mr)

First names

Gender

Male

Female

Marital Status  

Single

Married

Other (please specify)

Nationality  

South African

Other (please specify)

Population group (Information treated as confidential.)  

Asian

White

Coloured

Black

Other (please specify)

Please complete where applicable:

Employer:

Profession and position:

Religious affiliation:

Do you make use of a wheelchair?  

Do you suffer from any of the following? (Supporting proof of your disability must be included with your application.)

Blindness

Deafness

Cerebral paralysis

Speech defect

Other (specify)

* Notifiable Disease

Tuberculosis (TB)

Bacterial Meningitis

* It is specifically brought to the attention of applicants that tuberculosis and bacterial meningitis are extremely contagious and can have serious medical complications. Successful applicants are strongly advised to immunise themselves against the above-mentioned diseases before commencing their studies.
If not South African, please provide the following (mark applicable block):

<table>
<thead>
<tr>
<th>Study permit</th>
<th>Residence permit</th>
<th>Other (please specify)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permit number</td>
<td>Passport expiry date</td>
<td>Y Y Y M M D D</td>
</tr>
<tr>
<td>Passport number</td>
<td>Passport expiry date</td>
<td>Y Y Y M M D D</td>
</tr>
</tbody>
</table>

B. CONTACT DETAILS

Preferred method of communication
- Post
- E-mail
- Fax

Do you have access to CD-ROM facilities?
- Yes
- No

Home address

Postal address (if different from home address)

To whom should the account be sent?
- Father
- Mother
- Guardian
- Applicant personally
- Other

To which address should the account be sent?
- Home address
- Postal address
- Other

Please specify “other”.

Cell phone number

Home tel. no.
- Area code
- Number
- Extension

Work tel. no.
- Area code
- Number

Fax no.
- Area code
- Number

E-mail address

Internet address, if any

C. PRELIMINARY REPORT OF PROSPECTIVE STUDENT

Name of school

Address of school

Telephone number of school
- Area code
- Number

Year of matriculation

Matriculation examination number

Examinining authority: (mark with a cross where applicable)

| Department of Education (North-West) | Full exemption/B-degree studies |
| Department of Education (Mpumalanga) | Mature age conditional exemption |
| Department of Education (Gauteng) | Senior Certificate without exemption |
| Department of Education (Free State) | Other (specify)/Diploma studies |
| Other | |
D. POST-SCHOOL ACTIVITIES

Primary activity in year prior to study at the NWU:

School [ ] University [ ] Technical Institute [ ] Other (specify) [ ]

Work [ ] University of Technology [ ] Teachers’ Training College [ ]

Will this be your First [ ] Second/further registration at a tertiary institution? [ ]

Have you sat for any examination at a tertiary level? Yes [ ] No [ ]

Complete in reverse order (starting with the most recent) all tertiary academic work, including incomplete qualifications (compulsory for evaluation purposes)

<table>
<thead>
<tr>
<th>Period</th>
<th>Name of institution</th>
<th>Name of degree/diploma/certificate</th>
<th>Study completed</th>
<th>University-Student no.</th>
</tr>
</thead>
<tbody>
<tr>
<td>From</td>
<td>To</td>
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</table>

E. EMPLOYMENT RECORD

Please record your most recent positions of employment, starting with your current position(s):

<table>
<thead>
<tr>
<th>Period</th>
<th>Occupation</th>
<th>Employer</th>
</tr>
</thead>
<tbody>
<tr>
<td>From</td>
<td>To</td>
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<tr>
<td>Year/M</td>
<td>Year/M</td>
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</tbody>
</table>

SA Nursing Council Reference Number (Nursing applicants only)

F. SPORT PARTICIPATION, CULTURAL ACTIVITIES AND ACHIEVEMENTS

F.1 Achievements in sport (Indicate your participation in with an X. However, if you have achieved any of the following, use the applicable code instead of an X for the sport in question: P = Participation S = School colours PC = Provincial colours I = International colours C = Club colours N = National colours.)

<table>
<thead>
<tr>
<th>X</th>
<th>Type of Sport</th>
<th>Year</th>
<th>Team position</th>
<th>Leadership achievement e.g. captain.</th>
<th>Achievements e.g. time, distance, other</th>
<th>Coach: title, initials, surname and telephone no.</th>
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<td>Athletics</td>
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<td>Rugby</td>
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<td>Hockey</td>
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<td>Cricket</td>
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<td>Netball</td>
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<td>Soccer</td>
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<td>Other</td>
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</table>

F.2 Achievements in cultural and academic associations (e.g. olympiads)

<table>
<thead>
<tr>
<th>Cultural/Academic association</th>
<th>Achievement NATIONAL LEVEL</th>
<th>Achievement PROVINCIAL/REGIONAL LEVEL</th>
<th>Achievement SCHOOL LEVEL</th>
<th>Participation SCHOOL LEVEL</th>
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</tbody>
</table>
F.3 Leadership achievements (mark with a cross where applicable)

Has any of your brother(s) or sister(s) studied at NWU?   Yes  No
Member of management of a cultural or academic association
Residence head-boy / head-girl
Residence deputy head-boy / deputy head-girl
Member of the Students’ Representative Council
Captain of a first sports team
Captain of another sports team
Chairperson of a cultural or academic association

G. APPLICATION FOR ACCOMMODATION

An official application form for accommodation in the residences is available at:

Residence Administration
Building 25, Room G-26
PO Box 1174
VANDERBIJLPARK
1900

Telephone: (+2716) 910 3308
Fax: (+2716) 910 3304
E-mail: venter.karin@nwu.ac.za

H. SURETYSHIP (IF APPLICABLE)

1. I, the undersigned,

Full names and surname
Identity number

hereby bind myself as surety and co-principal debtor in solidum (i.e. for the full amount) for the due performance by the student of all his/her financial obligations towards the University as set out in paragraph 3 of section J above.

I confirm that I understand the meaning of the term in solidum as explained in the paragraph above

2. I hereby renounce the benefits arising from the legal exceptions de duobus vel pluribus res debendi and ordinis seu excussionis, and I confirm that I am aware of the legal effect of the above-mentioned renunciation, namely that it entails the following:

2.1 duobus vel pluribus res debendi (the principle that a debtor is only liable for a portion of the amount payable): The University can, in its discretion, claim full payment of all outstanding moneys owing to it from either the student or from myself as surety or jointly from both of us.

2.2 ordinis seu excussionis (the principle that a debtor is regarded as secondary and becomes liable only after the portion owed by the main debtor had been collected): I shall not be entitled to force the University to proceed against the student as principal debtor and to excuss him/her first before claiming performance from me as surety.

Signature

Date  Y Y Y Y M M D D
I. KINSHIPS

I.1 Father’s particulars
Surname

ID

Initials

Birth date

Title

Nationality: South African

Other (specify)

Occupation

Employer

Is your father an alumnus of NWU? Yes No

Is your father a donor? Yes No

If known, university number of father

Home address

Postal code

Postal address (if different from home address)

Postal code

Work address

Postal code

E-mail address

Cell phone number

Home Tel. no. Area code Number

Work Tel. no. Area code Number

Fax. no.

I.2 Mother’s particulars

Is your mother an alumnus of NWU? Yes No

Is your mother a donor? Yes No

If known, mother’s university number

Mother’s married name

ID

Mother’s maiden name

Mother’s initials

Title

Birth date

Nationality: South African

Other (specify)

Occupation

Employer

Home address

Postal code

Postal address (if different from home address)

Postal code

Work address

Postal code

E-mail address

Cell phone number

Home Tel. no. Area code Number

Work Tel. no. Area code Number

Fax. no.
### I.3 Particulars of guardian/friend/next of kin

This section must only be completed by applicants who are supported in their application by a guardian and not by a parent.

<table>
<thead>
<tr>
<th>Relationship</th>
<th>ID</th>
<th>Surname</th>
<th>Initials</th>
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<table>
<thead>
<tr>
<th>Birth date</th>
<th>Title</th>
<th>Maiden name (Married women)</th>
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</table>

Nationality: South African

Other (specify)

<table>
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<th>Occupation</th>
<th>Employer</th>
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Is your guardian an alumnus of NWU?  Yes [ ] No [ ]

Is your guardian a donor?  Yes [ ] No [ ]

If known, university number of guardian

<table>
<thead>
<tr>
<th>Home address</th>
<th>Postal code</th>
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<tr>
<th>Postal address (if different from home address)</th>
<th>Postal code</th>
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<table>
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<tr>
<th>Work address</th>
<th>Postal code</th>
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<th>E-mail address</th>
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<th>Home Tel. no.</th>
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<th>Work tel. no.</th>
<th>Area code</th>
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<th>Fax. no.</th>
<th>Area code</th>
<th>Number</th>
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### J. PROVISION OF INFORMATION

I hereby give consent and authorise North-West University (NWU) to release information which pertains to my personal records to the following persons/institutions:

Mark the applicable block(s) by signing (applicant) in the block(s).

- Father ID
- Mother ID
- Surety ID
- Bursary grantor
- Potential Employers
- Research Purposes
K. DEPARTMENT OF ACADEMIC ADMINISTRATION

Application for University card

All students are issued with university identity cards to enter the library, for use of other facilities and for purposes of identification during certain classes, examinations and on the computer network. This card is created on the basis of the details provided below, so that the card can be issued to you after registration. The card remains the property of the University and must be returned if you should suspend your studies.

* Two ID photographs of yourself should accompany the first application for admission (undergraduate and postgraduate).

* These photographs are required for administrative purposes, and also to enable us to provide you with a university identity card after registration.

* Please write your initials, surname, date of birth and signature on the reverse side of the photographs.

* You are cordially requested to paste the ID photographs in the frames below.

Initials
Surname
University number

These photographs remain the property of the NWU.

K. DEPARTMENT OF PROTECTION SERVICES

Application for University card

All students are issued with university identity cards to enter the library, for use of other facilities and for purposes of identification during certain classes, examinations and on the computer network. This card is created on the basis of the details provided below, so that the card can be issued to you after registration. The card remains the property of the University and must be returned if you should suspend your studies.

* Two ID photographs of yourself should accompany the first application for admission (undergraduate and postgraduate).

* These photographs are required for administrative purposes, and also to enable us to provide you with a university identity card after registration.

* Please write your initials, surname, date of birth and signature on the reverse side of the photographs.

* You are cordially requested to paste the ID photographs in the frames below.

Initials
Surname
University number

These photographs remain the property of the NWU.
1. I declare that I/my son/daughter (hereinafter referred to as the student) have/has completed the form in full and that the details are true and correct.

2. I would like the student to be placed in one of the University’s residences as a resident student. If I/the student should require urgent medical attention during my/the student’s stay in the residence, I authorise the housemaster or his delegate to call in a practising physician or medical specialist. Should an emergency operation or other treatment be required, I authorise the housemaster or his delegate to give the required written consent thereto on my/the student’s behalf. (Not applicable to distance education students.)

3. I/we, the undersigned, will be responsible for the prompt payment of all and any money payable to the NWU in terms of my/ the student’s enrolment and/or association with the NWU, now and in future, as set out in more detail in the official University brochures as determined and amended by the University Council from time to time. The contents of these brochures form the basis of the financial agreement between the University and myself/us and are regarded to be incorporated in their entirety into this agreement. I shall forthwith fax proof of every deposit/payment made by or on behalf of the student with regard to monies paid into the University’s bank account to enable the University to credit the student’s personal study account with the University.

4. I give permission that a student identity card may be issued to me/the student and I assume responsibility for all financial and other transactions negotiated and entered into by means of such card. I also bind myself/the student to the prescribed rules with regard to lost cards (the rules in question are provided when the card is issued and are available for purposes of information at Protection Services. University cards are issued to all students and are required among others, for the use of sport and library facilities, dining halls, restaurants and for personal identification in some classes, at examination venues and on the computer network. This card is issued on the basis of the details supplied by or on behalf of the student so that the card can be issued to the student after registration. Among others, It is expected of the student to wear the card visibly on his/her person and to treat it as a debit card. The card remains the property of the University and must be returned when the student terminates his/her studies. Lost cards must be cancelled immediately at the Department of Protection Services of the University.

5. I consent to the issuing of a computer user name to me/the student. I realise that the security of the password is the personal responsibility of the student. I/the student bind myself to the rules for the use of the University’s computer facilities as contained in the relevant policy documents and brochures and I/the student accept(s) responsibility for all transactions done in the student’s user name, including electronic mail and Internet access.

6. I understand that the University will at all times be entitled to summarily cancel my/the student’s registration should it become apparent that the information supplied on this form is false or incorrect. I further understand that the University reserves the right to cancel my/the student’s admission/registration in the event that I/the student was for any reason erroneously admitted to a qualification.

7. If I/the student fail/fails to make payments on pre-determined due dates, and if the University, at the University’s sole discretion should hand over to attorneys any amount of monies for collection, I undertake to pay all costs whatsoever which may be due and payable, including tracing fees, collection charges, advocate’s fees, and any expenses of whatever nature on an attorney- and-own-client scale. Any fees payable by me/ the student will firstly be allocated to the aforementioned costs, thereafter to interest and only then to the capital amount. A wage attachment order(s) may also immediately be issued against my/our employer(s) in order to attach my/our salary/salaries or wage(s) in order to collect the outstanding amount as a whole or in instalments.

8. Any amount owing and payable to the University in terms of the University’s financial rules as published in the brochure entitled “Fees Payable and Financial Rules”, may be fixed and proven by means of a certificate issued and signed by an authorised official of the University. Such a certificate shall be binding and will serve as prima facie proof of the extent and existence of such amount, unless and until the contrary is proved.

9. I understand that this undertaking signed by me specifically refers to my/the student’s application for admission to the University and/or application for continuation of studies at the University.

10. I hereby bind myself jointly and severally and in solidum together with the student to properly meet all conditions contained herein.

11. These conditions will remain valid and in force for the full duration of my/the student’s enrolment as a student at the University and thereafter until all commitments in terms hereof have been met.

12. I have satisfied myself as to and subject myself to all the rules and regulations contained in the brochures and in the Institutional Statue of the University which form part of this agreement and/or as it may be amended from time to time.

13. Potchefstroom shall be regarded as the place where this agreement has come into existence, regardless of where it may have been signed.

14. I hereby undertake to transfer to the University any intellectual property rights that may arise in the course and scope of the studies and research of the student at the University. by signing the necessary documents. I understand that, in the case of any commercial exploitation thereof, the University will remunerate me/the student in terms of the same policy that applies to staff of the University.

15. I understand that the University will take all reasonable steps to prevent me/the student from being injured or prejudiced for any injury or damage, whether or not it is caused by the negligence of the University or any of its employees, or a fellow-student, and I undertake not to institute any claims against the University in respect of such an injury or damage. I further undertake to indemnify the University should the University incur any liability whatsoever pursuant to any negligent or other act or omission by me/the student.
16. I/the student, my/his/her dependants, executors, administrators, and/or transferees hereby relinquish and indemnify the University against any claim or damage of whatsoever nature which may arise on or outside the campuses of the University during my/the student’s period of study at the University.

17. Do you currently own any amount of money to any tertiary institution in South Africa? Yes [□] No [□]

18. If the answer in above is YES, please indicate the name of the institution and the amount that is owed and attach all relevant details.

<table>
<thead>
<tr>
<th>Name of Institution:</th>
<th>Amount owed:</th>
</tr>
</thead>
</table>

Signed on this day of

SIGNATURE OF PARENT/GUARDIAN/SURETY/PERSON LIABLE FOR PAYMENT

SIGNATURE OF STUDENT

NAME AND SURNAME (please print)

ID number

NAME AND SURNAME (please print)

ID number
M. OFFICE USE ONLY

M.1. RECOMMENDATION BY FACULTY/SELECTION COMMITTEE

Application approved  □  Application rejected □  Year level to which admitted □

Other recommendations ______________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

DIRECTOR: ACADEMIC ADMINISTRATION: ______________________________________  DATE Y Y Y M D

M.2 RECOMMENDATION BY THE SCHOOL DIRECTOR (on request)

Application approved □  Application rejected □

Other recommendations ______________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

SCHOOL DIRECTOR: __________________________________________________________  DATE Y Y Y M D

FOR OFFICE USE ONLY

YEAR: 20............

University number: ______________________________  Qualification: ______________________________
Title: ___________________  Initials: ______________  Surname: ______________________________

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<th>Journal entry</th>
<th>Bursary</th>
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<tbody>
<tr>
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<td>Tuition fee:</td>
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<td>Registration fee:</td>
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<td>Accommodation deposit:</td>
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<td>T</td>
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<tr>
<td>Age exemption/Postgraduate</td>
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<td><strong>TOTAL</strong></td>
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Receipt number: ________________________  Date: ________________________  Signature: ________________________

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<th>APPLICATION FEE</th>
<th>ACCOMMODATION DEPOSIT</th>
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Date application is processed: Y Y Y M D

Signature: ______________________________
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<th>Comments</th>
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