



### Admin Centre

(047) 873 8800

### Campuses

Aliwal North	(051) 634 1035
Ezibeleni Engineering	(047) 873 1293
Queenstown	(045) 838 2593 /4
Queen Nonesi	(047) 873 8878/80
Sterkspruit	(051) 611 0205

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## APPLICATION FOR REGISTRATION - 2016

Indicate campus of your choice: \_\_\_\_\_

<p>If you have attached the following documents please tick</p> <p>Certified copy of ID <input type="checkbox"/></p> <p>Certified copies of certificates <input type="checkbox"/></p> <p>Certified Copy of ID of person paying the account <input type="checkbox"/></p> <p>Deposit Slip as proof of payment of registration fee <input type="checkbox"/></p> <p style="text-align: center;"><i>Please complete the form in black ink</i></p>	<h3>For Office Use Only</h3> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">NCV</td> <td style="width: 10%;">Nated</td> <td style="width: 10%;">Skills</td> <td style="width: 10%;"></td> <td style="width: 10%;">Accepted</td> <td style="width: 10%;">Not Accepted</td> <td style="width: 10%;"></td> <td style="width: 10%;"></td> </tr> <tr> <td colspan="4">Student No.</td> <td colspan="4"></td> </tr> <tr> <td>Without Grade 12</td> <td>Grade 12 NEX</td> <td>Grade 12 EX</td> <td></td> <td colspan="4">No. of Subjects</td> </tr> </table>	NCV	Nated	Skills		Accepted	Not Accepted			Student No.								Without Grade 12	Grade 12 NEX	Grade 12 EX		No. of Subjects			
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Student No.																									
Without Grade 12	Grade 12 NEX	Grade 12 EX		No. of Subjects																					

### 1. PERSONAL INFORMATION

Surname  Initials  Title

Full Names  ID Number

Are you a South African Citizen? Yes  No  If No, what is your citizenship

If not South African citizen, do you have a valid study permit Yes  No  Highest School Grade Passed  Year Passed

Gender F  M  Ethnicity African  Coloured  White  Indian  Other, Please Specify

Marital Status Single  Married  Divorced  Widow  Other, Please Specify

Home Language  Mother Language  Transport Type Bus  Taxi  Private

### 2. CONTACT INFORMATION

Home Tel No.  Parent Work Tel No.  Cell No.

Home Address	Postal Address if different from home address	Address while studying if different from home address
<input style="width: 240px; height: 25px;" type="text"/>	<input style="width: 240px; height: 25px;" type="text"/>	<input style="width: 240px; height: 25px;" type="text"/>
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Code: <input style="width: 150px;" type="text"/>	Code: <input style="width: 150px;" type="text"/>	Code: <input style="width: 150px;" type="text"/>

### 3. Next of Kin

Surname  Initials  Title

Full Names  ID Number

Home Tel No.  Parent Work Tel No.  Cell No.

Relationship Parent  Uncle  Aunt  Brother / Sister  Legal Guardian  Spouse  Other, Specify

Residential Address

Code:

## 4. MEDICAL INFORMATION

### EMERGENCY CONTACT PERSON

I) Contact Person  Cell No.

Relationship  Parent  Uncle  Aunt  Brother / Sister  Legal Guardian  Spouse  Other, Specify

Medical Aid  Medical Aid No.  Primary Member

Relation  Blood Type  Ailment

Disability, If disabled provide details  Allergy  Medication

Special Requirements

## 5. COURSE DETAILS

### Select Course

#### NCV

INFORMATION TECHNOLOGY	<input type="checkbox"/>	GENERIC MANAGEMENT	<input type="checkbox"/>	FINANCE, ECONOMICS AND ACCOUNTING	<input type="checkbox"/>
HOSPITALITY	<input type="checkbox"/>	TOURISM	<input type="checkbox"/>	ELECTRICAL INFRASTRUCTURE CONSTRUCTION	<input type="checkbox"/>
ENGINEERING & RELATED DESIGN	<input type="checkbox"/>	CIVIL CONSTRUCTION	<input type="checkbox"/>	OFFICE ADMINISTRATION	<input type="checkbox"/>
CIVIL - CARPENTRY	<input type="checkbox"/>	CIVIL - BRICKLAYING	<input type="checkbox"/>	EDUCATION AND DEVELOPMENT	<input type="checkbox"/>

### REPORT 191

PUBLIC MANAGEMENT	<input type="checkbox"/>	MANAGEMENT ASSISTANT	<input type="checkbox"/>	HUMAN RESOURCES MANAGEMENT	<input type="checkbox"/>
BUSINESS MANAGEMENT	<input type="checkbox"/>	CIVIL ENGINEERING	<input type="checkbox"/>	ELECTRICAL ENGINEERING	<input type="checkbox"/>
MECHANICAL ENGINEERING	<input type="checkbox"/>	FARMING MANAGEMENT	<input type="checkbox"/>	FINANCIAL MANAGEMENT	<input type="checkbox"/>
TOURISM	<input type="checkbox"/>	WATER & WATER WASTE TREATMENT PRACTICE	<input type="checkbox"/>	HOSPITALITY AND CATERING SERVICES	<input type="checkbox"/>

## 6. ACADEMIC EXPERIENCE

Student at this College  Student with other FET College  Secondary School Student

Technikon Student  University Student  Other, Specify

## RULES AND REGULATIONS

- The applicant / student will be bound by all and any rules, regulations, policies and procedures of the college as laid down by the Department of Education, the College Council and or the principal from time to time and the student will acquaint him/herself with the rules and regulations.
- The applicant accepts liability for any loss or damage suffered by the College arising from the loss or damage suffered by the college arising from the loss or damage to any instrument, equipment or property of the college and whether occasioned by theft, misuse or negligence of the student. The applicants liability shall be commensurate to the cost of repair or replacement of the aforesaid property.
- The applicant consents to the jurisdiction of the nearest magistrates court and/or the high court of South Africa (Eastern Cape division), the forum at the sole discretion of the college and its aforesaid organs, to determine any dispute arising from the enrolment of the student and between the applicant and college. In the event that the college is obliged to institute legal proceedings in either the magistrates court and/or the high court of South Africa, for outstanding tuition and related expenses due by the applicant, then and in the event, the applicant shall be liable to the college for all expenses incurred in collecting any amount owing by the applicant, which expenses shall include all legal charges on the scale as between attorney and own client. All collection charges and tracing fees
- The applicant undertakes to furnish the college and the colleges request with a certificate of health at enrolment, otherwise the students will be subjected to the colleges acceptance that the student is in a sound state of health .This acceptance shall be in the sole discretion of the college.
- The Council may in its sole discretion grant refunds, and make changes or adjustments to fees.
- The Applicant hereby accepts the Schedule of Fees applicable to the College, as prescribed from time to time, and will be bound thereby.
- Should an applicant terminate his/her enrolment at the College for whatever reason after the official registration, the applicant will be obliged to pay any outstanding fees to the College.
- A 10% (ten percent) administration charge is applicable to all cancellations prior to the closure of the registration period. After this period, only refunds with documentary proof regarding death, interim disability and relocation will be considered.
- Should I, during the course of my studies at the college, sustain any injuries or contract any illness or suffer loss or damages, I hereby undertake not to institute any claim against the college on account thereof, irrespective of the cause of such damages or loss.
- In the event of my death during the course of my studies, this undertaking shall be binding on the executor of my estate and my heirs and successors-in-title. Under the circumstances referred to, I or my executor, administrator, heirs and successors-in title (in the event of my death) hereby indemnify the college in respect of any damages suffered by me from any of the causes referred to above.
- For all purposes hereof the applicant chooses the address for the servicing of all documents and legal processes the addresses set out above.
- The Applicant accepts that the personal possessions of the Applicant/Student are not covered in respect of any risks by the College's insurers and that it is the responsibility of the Applicant to personally arrange the necessary and appropriate insurance cover for the Applicants/Students personal possessions.
- The primary medium of instruction to be used in the College will be English.
- The laws of the republic of South Africa shall apply to all or any disputes arising from this agreement.

**I fully understand and accept above rulings and I also fully understand that I am not entitled to a reimbursement of any class fees paid by me, nor are these fees transferable to another period.**

Signed at.....(PLACE) on this.....day of.....(MONTH).....(YEAR)

Signature of applicant : \_\_\_\_\_

Signature of parent/legal guardian (If applicant is under 21 years): \_\_\_\_\_

Signature of witness 1 : \_\_\_\_\_

Signature of witness 2: \_\_\_\_\_

**If you would like to apply for NFSAS Bursaries, kindly request application forms and return them together with this form**

Did you receive any career guidance prior to registration

YES	NO
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Would you be interested in career guidance prior to registration

YES	NO
-----	----

Were you informed about financial assistance

YES	NO
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Distance from your residence to the College in kilometres

How did you hear about the programmes that we offer at the college

Which radio station do you listen to

**If I am admitted as a student to the college, I undertake to:**

I undertake to immediately notify the Student Officer in writing if I change or cancel my registration. I further undertake, if applicable to me, to immediately notify my legal guardian and/or the person who assumes liability for payment of the fees owing by me if I change or cancel my registration and to provide the said person with all accounts received from the college. I further acknowledge that such cancellation is not valid unless given in writing.

I am aware that my registration is valid only if it complies with the regulations of the qualification concerned, notwithstanding the acceptance of this registration by the college.

The fees and conditions shall be determined by the Council and are subject to amendment without prior notice. I undertake to pay all fees prescribed by the college in respect of any module/qualification for which I register, by the due date as well as all other fees, which may be owing by me to the college. I further note and accept liability for payment of interest as stipulated by the college from time to time in the event of my failing to pay fees for which I am liable by the prescribed date. In the event of the college successfully instituting legal action against me for the recovery of any amounts owing, due and payable or the enforcement of any legal rights of the college, I shall be liable to pay all legal costs incurred on an attorney and client scale, including collection commission and interest.

I agree that the college may provide me with statements of account and any other communiqués by way of electronic communication through data messages.

I accept that my examination results, certificate/diploma/degree and study record may be withheld under the following circumstances: in the event of my student account being in arrears or in the event of any disciplinary matter pending against me.

I understand that if after registration it is found that my tuition fees or residence account or any other monies including the cost for the replacement of library materials owing to the college have not been paid by the prescribed date, my registration may be cancelled.

I will immediately notify the Admissions Office, in writing, if I change my address.

I understand and accept that any work produced by me during my studies or research at the college which may be the object of an intellectual property right, as well as any data or information collected or obtained by me, shall remain the property of the college, and I undertake not to alienate, transfer or make known such to any other party without the written permission of the college.

I have no objection to my name being given to another educational institution, which will enable me to upgrade my educational qualifications should my application not be accepted.

I understand that the college may by law be required to disclose information about or relating to myself and my studies which is on record at the college, to a third party requesting access to such information. I specifically authorise the college to supply information relating to my studies and conduct while at the college, to my parents/legal guardians (applies only to minors), to potential employers and to sponsors of my studies, including my parents/legal guardians and my employer.

Upon registration I accept responsibility for ensuring that I am registered for the correct modules; that I have no examination or lecture timetable clashes; and that I have made provision for adequate modules and credits for the qualification I wish to obtain.

I undertake, that should I be admitted to the residence, the college may assume that I have constructive knowledge of all present and future policies and rules relating to residences.

The college uses a digital document management system to store and retrieve information. All student records and other correspondence will therefore be converted to a data format and originals may be destroyed after a period of time.

The information furnished by me herein is to the best of my knowledge true, correct and complete.

An applicant who submits any document in support of this application, which contains a false statement, is altered or forged, will be prosecuted both criminally as well as in terms of the Student Disciplinary Code. The findings of the Disciplinary Committee will be communicated to all other tertiary institutions in the country.

Sign here/Thumb print.....

Date.....

**Declaration by applicant's parent/legal guardian/surety**  
(to be completed only if the applicant is younger than 18 years or is currently unemployed)

**Details of parent/legal guardian/surety**

Name.....  
Surname.....  
Identity number of parent/legal guardian/surety.....  
Home address.....  
..... Postal code.....

**Home telephone number:** Code.....Number.....  
Fax..... Cell.....  
E-mail address.....  
Relationship to applicant (eg. father, uncle, aunt etc.).....  
Employer's name.....  
Employer's address.....  
..... Postal code.....

**Work telephone number:**  
Code.....Number.....

I confirm that I am the legal guardian of the applicant and agree to the provisions contained in the declaration of the applicant.

I agree to any change in degree, diploma or module that the applicant may take. The college shall not be responsible if the applicant abandons his/her studies or leaves the college.

I apply on behalf of the applicant in my personal capacity for his or her registration as a student at the college and hereby bind myself as surety and principal co-debtor for all fees due and payable owing to the college by the applicant.

Insofar as it may be applicable to me, I undertake, should the applicant be admitted to the college to: comply with all the rules and regulations of the college; acquaint myself with all the rules, regulations and instructions applicable to the qualification for which the applicant enrolls.

I shall be personally liable for payment of all fees, which may become due to the college in terms of this application and I renounce the benefits of exclusion, division and cession of action should any action be taken by the college for the recovery of fees owing, due and payable to the college by either myself or the applicant.

I indemnify the college against any claim against the college arising out of any injuries, loss or illness suffered or contracted by the applicant, myself or any third party representing myself or the applicant during the course of or arising out of his/her studies at the college, irrespective of the cause of such damages, illness or loss.

I undertake not to institute any claim against the college on account of any injuries or loss suffered or illness contracted by the applicant during the course of or arising during his/her studies at the college.

The fees and conditions shall be determined by the Council and are subject to amendment without prior notice. I undertake to pay all fees prescribed by the college in respect of any module for which I register by the due date as well as other fees, which may be owing to the college. I further note and accept liability for payment of interest as stipulated by the college from time to time in the event of my failing to pay fees for which I am liable for by the prescribed dates. In the event of the college successfully instituting legal action against me for the recovery of any amounts owing, due and payable or the enforcement of any legal rights of the college, I shall be liable to pay all legal costs incurred on an attorney and client scale, including collection commission and interest. I have furthermore noted that all accounts in respect of the applicant will be sent to him/her to check for accuracy and that it is the said applicant's duty to make accounts concerned available to me for settlement. I agree that the college may provide me with statements of accounts and any other communiqués by way of electronic communication through data messages. These data messages may be sent to the cellular number provided by the student.

I understand that the registration of the applicant may be cancelled or examination results may be withheld, if I fail to pay any fees owing, due and payable to the college in respect of the applicant on the due date without any prejudice to any rights, which the college may have in respect of the recovery of such fees.

In the event of the college successfully instituting legal action against me for the recovery of any amounts owing, due and payable or the enforcement of any rights of the college, I shall be liable to pay all legal fees on an attorney and client scale, including collection commission and interest.

I have not been declared insolvent by a competent authority or any court of law on the date of signing this agreement and have full contractual capacity

I declare that the information supplied by me on this form is, to the best of my knowledge, true and correct.

Signature of parent / legal guardian / surety.....

Date.....

Place.....

**NB: A copy of the first page of the identity document of the parent / legal guardian / surety must be submitted.**

<b>BANKING DETAILS</b>		
ACCOUNT HOLDER : IKHALA FET COLLEGE	BANK: FIRST NATIONAL BANK	BRANCH NAME : QUEENSTOWN
ACCOUNT NUMBER : 62033889710	TYPE OF ACCOUNT: CHEQUE	BRANCH CODE : 210920

**For Office Use Only**

Student assisted by : \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_ Signature: \_\_\_\_\_

Captured by : \_\_\_\_\_ Date: \_\_\_/\_\_\_/20\_\_\_ Signature: \_\_\_\_\_