

STUDENT APPLICATION FORM (South African Citizen)

Please refer to APPLICATION PROCEDURE for instructions on how to complete this form

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Applying for Academic Year	201_	Whole year progr	ramme	Semester	1	2 Trimeste	er 1	2 3	3 Offic	cial use
Programme that I wish to apply	for	Specify course na	ame and	level						
If unsuccessful I am to prepare	d to ap	ply for Specify	course n	ame and level			(If app	licable)		
My third choice programme is	Spec	ify course name a	and level				(If app	licable)		
Student Personal Detail	S * See	POPI declaration overle	af ITS	NUMBER					Offic	cial use
Surname										Captured
Title Mr Ms Other						Initi	als	$\perp \perp \perp$	<u> </u>	
First Names Write them e.	xactly	as							SREGB-1/1	
they are in your ID document	N.A.	V V V V	. 40 DEC	14005		Condo		4	S	
Birth Date D D - M M Marital status Single S	Morrios	Y Y Y Y e.g	J. 12-DEC			Gende	er I	VI F	_	
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Home Languageinsert cod				the next two lines		<i>(</i> '1	T. I. i.		SREGB-1	
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		Indian 3				Duraami Ana	lication	- V A	_	
Bursary Are you paying the fee					•	Bursary App		Y	<u>-</u>	
Where did you learn about			<u>Cape T</u>		ck all					
Advice Desk		ooards		Call Centre		Career Exp	0			
Facebook	Info	rmation session		Magazine/guide	spe	ecify				
	specify			Open Day		Pamphlets				
Parents' Evening	Rad		spec		ı	Posters				
School Visit	SM			Twitter		Vehicle Bra	nding			
Web Site		m a friend		From College staf						
Other	specify									
What were you doing la	st yea	ar? Please ticl	k best c	ne, and provide	sch	ool if appli	cable		23	Captured
University Student 01		employed	16	Employed	15	Other sp		09	SREGB-1	
Grade 12 Learner 08	Gra	de 11 Learner	10	Grade 10 Learner	11	Grade 9 L	.earner	12		
College of Cape Town 13	Oth	er FET College	14	Foreign Education	17				S S	
If at School, School Name	spe	cify								
Education										
Highest School Grade PASSI	FD			Final examina	tion F	esults avai	lable?	YN		
If you have MATRIC, did		chieve university	"Endor					YN		
exemption"?	,	,				3				
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Matric School name	specify	/							222	
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Postal Code		Town			To	wn must ma	tch Post	al Code	_ 0	
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Flat number and Flat or build				ĺ		Nay not be F	РО Вох			
Street No. and Street Name		•				-				
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Email address											0)											
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Cell phone No. Country-code Area-code - Country-code blank for South Africa																						
Email address																						
RSA ID No.									ID	nun	nbe	er of	Nex	t-of-	-Kin							
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Cerebral Palsy		(ე5	De	Deafness 06 Deaf-Blindness 07 Epilepsy 08									SRE								
Hard of Hearing		(09		sability Intellectual Disability							Partial Sight/Low Vision	12	O)								
Physical Disabled			13	Dis	sab	led	telled	llectually 14 Specific Learning 15 Psychiatric Disorder 16 Disability														
Dyslexia			17	NC	ONE							18	Plea	ase	sele	ect	18 if y	ou ha	ave no disabilities			
IMPORTANT NOT	ICE	ES								_				_		_			-			

1. This is an application only. If you are successful you will be invited to Register. You become a student of the College of Cape Town only once we have issued an official proof-of-registration printout. Incomplete applications or those not accompanied by all the required documentation will not be processed.

POPI declaration (Protection of Personal Information Act)

2. Where required in terms of national policies the College must, and will, share your personal information. In particular your data *will* be shared with national departments such as the Department of Higher Education (DHET) and with prospective Work Placement host employers. Your details may also be shared with external partners of the College in order to provide additional services to students. The College is unable to avoid this.

I/We the undersigned declare that all information provided herein is in full, true and correct and acknowledge that incomplete or incorrect information will result in the application being summarily rejected. I/We further agree to my personal data being shared as required.

Signature of applicant	Date of application	Signature of Guardian
		If applicant not yet 18 years

Completed applications must be hand-delivered to the CAMPUS, or faxed to the CAMPUS, or posted to PO Box 1054, CAPE TOWN, 8000

Please attach copies of the following documents:

- Certified copy of highest academic qualification/ school grade
- Copy of your SA National ID

College Administration Official use	Chk	Name (print) / Signature	Date	
Acknowledgement of Application sent (SMS)				
Signoff on Capture				
Approval of Application				
Student informed of approval				