



Private Bag X5008  
**KIMBERLEY**  
 8300

Chapel Street  
**KIMBERLEY**  
 8301

# APPLICATION FORM: RESIDENCE 20\_\_

(FIRST TIME APPLICANTS)

**COMPLETE THIS SECTION ONLY IF YOU REQUIRE ACCOMMODATION IN A UNIVERSITY RESIDENCE.  
 (THE UNIVERSITY RESERVES THE RIGHT TO PLACE STUDENTS IN RESIDENCE AND THEREFORE  
 APPLICATION FOR RESIDENCE IS NOT A GUARANTEE FOR PLACEMENT.)**

**FIELD OF STUDY APPLIED FOR**

1<sup>st</sup> Choice  2<sup>nd</sup> Choice

**PERSONAL DETAILS**

Surname

First Names (As stated on ID/Passport)

Title (Please tick ✓)

MR	MRS	MS
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ID/Passport Number

Area Code  Home Telephone Number

Mobile Phone Number

E-Mail Address

Physical Address

Postal Code

Postal Address (if different from physical address)

Postal Code

**DETAILS OF YOUR PARENT/GUARDIAN/NEXT OF KIN (COMPULSORY)**

Surname

First Names (As stated on ID/Passport)

Title (Please tick ✓)

MR	MRS	MS
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Relationship to applicant:

Parent

Guardian

Next of Kin

ID/Passport Number

Area Code  Home Telephone Number

Area Code  Work Telephone Number

Mobile Phone Number

E-Mail Address

Physical Address

Postal Code

Postal Address (if different from physical address)

Postal Code

**PLEASE TURN OVER**

