

<b>Student number</b>	
-----------------------	--

*For office use only*

## APPLICATION FOR ADMISSION FOR THE YEAR

2	0		
---	---	--	--

The University is currently in the process of consolidation. It should, however be borne in mind that, although everything will be done to accommodate you at the campus of your preference, placement remains at the discretion of the institution. Certain programs are only offered at certain campuses.

Address your application to the Admissions Office at the postal address as indicated.

<i>Tick one</i>	<i>Tick one</i>	<b>Admissions Office</b> <b>P O Box 1906</b> <b>BELLVILLE</b> <b>7535</b>
<b>CAPE TOWN CAMPUS</b>	<b>MOWBRAY CAMPUS</b>	
<b>BELLVILLE CAMPUS</b>	<b>GRANGER BAY CAMPUS</b>	
<b>WELLINGTON CAMPUS</b>		

<b>Have you studied at Peninsula Technikon or Cape Technikon, or CPUPT before?</b>	<b>Yes</b>	<b>No</b>
<b>If yes, please provide your student number</b>		

<b>TITLE e.g. Mr, Ms</b>	<b>INITIALS</b>
--------------------------	-----------------

<b>SURNAME</b>	
<b>FIRST NAMES</b>	

PROPOSED COURSE OF STUDY			
<b>Choice 1</b>		Full-time	Part-time
<b>Choice 2</b>		Full-time	Part-time

**NB** Applicants should please note that their second choice course of study will only be processed in the event that their first choice course of study has been unsuccessful.

<b>STUDY PERIOD</b>	eg. 1 <sup>st</sup> , 2 <sup>nd</sup> or 3 <sup>rd</sup> year of attendance
---------------------	---

**FOR OFFICE USE ONLY**

<b>Choice 1</b>	Accepted	Provisionally Accepted	Not Accepted	Waiting List	SIGNATURE:	Date:
<b>Choice 2</b>	Accepted	Provisionally Accepted	Not Accepted	Waiting List	SIGNATURE:	Date:
<b>Comments</b>						

Receipt Number	Date	Amount	Cashier

## SECTION A: INSTRUCTIONS

### PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THE FORM

#### 1 General

- 1.1 This form must be completed by all students applying to the Cape Peninsula University of Technology for the first time.
- 1.2 It is in your own interest to ensure that this form is completed in full and that certified copies of all supporting documents are enclosed. If any questions are left unanswered or certified documents are not enclosed, or **the contract is not signed**, it will cause a delay as the form will be returned to you for completion. Please write in **black** ink and use block letters.
- 1.3 A separate questionnaire for **RADIOGRAPHY COURSE (ONLY)** must be completed, including the application form.
- 1.4 The closing date for applications for the following year is 31 August. The result of your application will be communicated to you after 31 October.

#### 2 Entrance Requirements

- 2.1 **As from January 2009 the following admission requirements shall apply:** A National Senior Certificate (NSC) as certified by Umalusi with an achievement rating of 3 (Moderate Achievement: 40 – 49%) or better in four recognised NSC 20-credit subjects, an achievement rating of 2 for Mathematics or Mathematical Literacy, an achievement rating of 3 in the required official language at Home Language level and an achievement rating of 2 in the other required language on at least First Additional Language level; one of these languages shall be English or Afrikaans.
- 2.2 All candidates with Senior Certificate on Higher and, or Standard Grade are still accepted.
- 2.3 All candidates who comply with the minimum requirements are still subject to selection procedures.

#### 3 Documents

- 3.1 A certified copy of the first page of your Identity Document (or certified copy of your Passport) must accompany this application.
- 3.2 A certified copy of your Senior Certificate or equivalent qualification must be submitted with your application. If you are still in Grade 12, your marks obtained in Grade 11 together with your most recent Grade 12 marks must be submitted. If you attended any other higher education institution, an original Academic Record and a Certificate of Conduct, or certified copies of other certificates/ diplomas/ degrees obtained previously, must also be submitted.
- 3.3 International students must also meet the requirements set out in paragraph 4 below.

#### 4 International Students (non-South African citizens)

- 4.1 Certified copies of the following documents must accompany this form:
  - Your passport and an evaluation of your qualification by the South African Qualifications Authority (SAQA)  
SAQA can be contacted at:  
Telephone number : +27 +12 431 5000  
Website address : saqa.org.za  
Address : Postnet Suite 248, Private Bag X06, Waterkloof 0145, South Africa.
  - You are required to produce the Highest Qualification from the School or College

#### 5 Application Fee

- 5.1 A **R100 non-refundable application fee** must accompany this form.  
A late application fee of **R150** is applicable from 1 September to 30 November. Thereafter the late application fee will be **R200**.
- 5.2 The following payment methods are accepted:
  - **Only crossed postal orders and cheques will be accepted**, and they must be made out to **Cape Peninsula University of Technology**.
  - Cash payments can be made at any time, directly to the Cashiers' Office on your preferred campus.
  - Bank deposit:  
Account Name : Cape Peninsula University of Technology  
Bank Name : ABSA Bank  
Branch : Bellville  
Branch code : 632005  
Account Code : 01202660521  
Swift Code (for payment outside SA) : ABSA ZA JJ  
Deposit Reference : ID Number, Surname and Initials

**NB: Please attach a copy of the proof of payment to the Application Form**



## SECTION C: CONTACT DETAILS

<b>POSTAL ADDRESS</b> <i>(where you live permanently or where you can be contacted)</i>																				
											<b>POSTAL CODE</b>									
<b>HOME PHONE NUMBER</b>																				
<b>WORK PHONE NUMBER</b>																				
<b>CELLPHONE NUMBER</b>																				
<b>EMAIL ADDRESS</b>																				

<b>CONTACT DETAILS</b>  <b>ACCOUNT ADDRESS</b> <i>(person responsible for payment of fees)</i>																				
											<b>POSTAL CODE</b>									
<b>TITLE</b> (e.g. Mr, Mrs)																				
<b>HOME PHONE NUMBER</b>																				
<b>WORK PHONE NUMBER</b>																				
<b>CELLPHONE NUMBER</b>																				
<b>EMAIL ADDRESS</b>																				

<b>CONTACT DETAILS OF PARENT/GUARDIAN/FRIEND OR RELATIVE</b>	<b>RELATIONSHIP</b> <i>(e.g. father)</i>																			
<b>TITLE</b> (e.g. Mr, Mrs)																				
<b>INITIALS</b>																				
<b>SURNAME</b>																				
<b>POSTAL ADDRESS</b> <i>(domicillium citandi et executandi)</i>																				
											<b>POSTAL CODE</b>									
<b>HOME PHONE NUMBER</b>																				
<b>WORK PHONE NUMBER</b>																				
<b>CELLPHONE NUMBER</b>																				
<b>EMAIL ADDRESS</b>																				

## SECTION D: HIGH SCHOOL (OR EQUIVALENT) INFORMATION

<b>MATRIC AUTHORITY</b> (e.g. Western Cape Education Department)	
---	--

<b>TYPE OF GRADE 12</b> (Enter code from list below)		
<b>Grade 12 types:</b> 01 full or Complete Exemption 03 Ordinary Conditional Exemption 04 Mature Age Exemption 05 Foreigner's Exemption 06 Immigrant's Exemption 07 Other Senior Certificate 08 NTC/N3/NSC 09 Grade 12 Practical 10 Other 11 Discretionary Provision 12 NSC (Effective from 2009)		

<b>GRADE 12 EXAM NUMBER</b>	
-----------------------------	--

<b>DATE OF GRADE 12 EXAM</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>Y</b>	<b>M</b>	<b>M</b>

<b>NAME OF HIGH SCHOOL / COLLEGE ATTENDED</b>

Please provide your latest available High School results in the table below. If you are still in Grade 12, your marks obtained in Grade 11 together with your most recent Grade 12 marks must be submitted. Identify clearly the results you are submitting.

<b>RESULTS SUBMITTED</b> (tick one)	<b>FINAL GRADE 11</b>		<b>MID GRADE 12</b>		<b>FINAL GRADE 12</b>	
-------------------------------------	-----------------------	--	---------------------	--	-----------------------	--

SUBJECT	SYMBOL	SUBJECT	SYMBOL

## SECTION E: PREVIOUS HIGHER EDUCATION

If you have already been a student at a Higher Education Institution (for eg. at a Technikon, University or College), please complete this section. Provide the details of your most recent enrolment only.

<b>YEAR OF FIRST REGISTRATION</b>					<b>YEAR OF LAST REGISTRATION</b>				
<b>NAME OF INSTITUTION ATTENDED</b>									
<b>NAME OF QUALIFICATION</b>									
<b>QUALIFICATION COMPLETED</b>			Yes	No	<b>PREVIOUS STUDENT NUMBER</b>				

Please provide details of subjects passed, in respect of this qualification.

SUBJECT	MARK	YEAR PASSED	SUBJECT	MARK	YEAR PASSED

If you would like to gain academic credit, or if you are applying for exemption or recognition of subjects, please request an application form from the faculty office at the campus to which you are applying.

Include with your application an original academic record and a certificate of conduct; or a certified copy of your previously obtained certificate / diploma / degree.

## SECTION F: DISABILITY STATUS

If you have a disability, please indicate it by ticking the appropriate block:

<b>BLINDNESS</b>		<b>IMPAIRED MOBILITY</b>	
<b>CEREBRAL PALSIED</b>		<b>LEARNING DISABILITY</b>	
<b>CHRONIC ILLNESS</b>		<b>PARAPLEGIC</b>	
<b>DEAFNESS</b>		<b>PARTIALLY SIGHTED</b>	
<b>DYSLEXIA</b>		<b>QUADRIPLEGIC</b>	
<b>EMOTIONAL</b>		<b>SPEECH</b>	
<b>EPILEPSY</b>		<b>OTHER (please specify)</b>	
<b>HARD OF HEARING</b>			

**SECTION G: LEGAL UNDERTAKING (COMPULSORY)**

I,.....I.D.No.,.....  
declare that all the particulars supplied by me in this form are true, complete and correct. I accept that incorrect or misleading information could lead to the cancellation of this application.

- 1. I undertake:
  - 1.1 to comply with all the rules and regulations, including the disciplinary rules, of the Cape Peninsula University of Technology, including any amendments thereof as published from time to time and to acquaint myself with all the provisions thereof;
  - 1.2 to notify the Faculty Office immediately if I abandon my course of studies and/or change my address;
  - 1.3 to acquaint myself with and adhere to all the rules and general regulations applicable to the course for which I wish to enroll as well as the rules regarding the payment of fees;
- 2. I undertake that I will not hold the Cape Peninsula University of Technology liable nor make any claim against the University for any compensation and/or any expenses incurred or damages suffered as a result of or in respect of any injury to me or illness or my death, irrespective of whether any such damages, injury or death may have been attributable to any degree of negligence on the part of the University or one or more of its employees or other person (s) for whose actions it might, but for this undertaking, have been responsible.
- 3. I am aware that my enrolment is valid only if it complies with the regulations governing the course concerned, notwithstanding the acceptance of this enrolment by the University.
- 4. I accept that, if I abandon or change my course of study at any time, no cancellation or reduction of fees will be considered and that I will remain liable for the payment of all fees in full.

**SIGNATURE OF APPLICANT:** ..... **DATE:** .....

**Herein assisted as far as may be necessary while the applicant/student is still under the age of eighteen years:**

I,.....I.D.No.,.....  
the undersigned, hereby acknowledge myself to be jointly and separately responsible for monies which the above-mentioned applicant may at any stage be owing to the Cape Peninsula University of Technology in terms of the agreement that he/she concluded with the Cape Peninsula University of Technology, as set out above, including any change thereto.

**SIGNATURE OF PARENT OR LEGAL GUARDIAN:** ..... **DATE:** .....

**N.B It is compulsory that this contract is signed by all parties concerned.**

## SECTION H: CHECKLIST

Please note that the University does not consider incomplete applications. Before submitting your application, please check that you have done everything on the list below, which applies to you. We suggest you tick the box next to each point when you have checked it.

<ul style="list-style-type: none"> <li>▪ Have you filled in all sections of the form that apply to you?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you ensured that you meet the minimum admission requirements for the course you are applying for?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you signed the “Legal Undertaking” declaring that the information given is complete and correct?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you are under 18, have you obtained your parent’s/guardian’s signature?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you included your R100, 00 application fee? This is an administration fee and is <b>non-refundable</b>.</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you wish to be considered for a place in residence, have you completed the Residence Application Form? <b>NB: applying for accommodation in residence does not guarantee that you will be allocated room in a residence.</b></li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you signed the Residence Contract, if you are applying for residence?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you provided all the contact details requested in the form?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ Have you provided your ID number and attached a certified copy of your ID document?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you already have a Grade 12 Certificate, have you enclosed a certified copy of it?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you are already a student with another higher education institution or if you have already studied at one, have you enclosed a detailed academic record and a certificate of conduct from the institution where you studied last?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you have completed a qualification at another Higher Education institution, have you attached a certified copy of your highest completed qualification?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you are an international student, have you applied for a study permit in your home country?</li> </ul>	
<ul style="list-style-type: none"> <li>▪ If you are an international student, have you attached a certified copy of your passport or certificate of refugee status, and the SAQA evaluation of your school qualification?</li> </ul>	

## SECTION I: APPLICATION FOR RESIDENCE ACCOMMODATION

*Only complete this section if you wish to apply for Residence accommodation.*

Do you require University Residence Accommodation?	Yes	No	If YES, for what period?	Full Year	Semester 1	Semester 2
--	-----	----	--------------------------	-----------	---------------	---------------

Please indicate the Residence you would like to enter, if you have a preference. Your preference will be taken into consideration, but it may not be possible for the University to allocate you to your Residence of choice. Please select from ONE of the choices below, at your preferred campus as indicated on page 1.

If you have indicated your campus of preference to be the **Cape Town Campus**, or any campus previously of the Cape Technikon (including Wellington Campus), please select from the following Residences.

### CAPE TOWN CAMPUS

Barkly House		Waterside Residence	
Catsville Residence		Ambassador Residence	
Down Town Lodge		Palm Court Residence	
Elizabeth Women's Residence		Municipality Houses (BTech & MTech students only)	
J & B House		Masimanyane Residence	
Sandenburgh Men's Residence		Phumelela Residence	
Viljoenhof Residence		Sikelela Residence	
St Peter's Square			

### WELLINGTON CAMPUS

Bliss		Navarre Men's Residence	
Meiring		Wouter Malan Women's Residence	
Murray			

If you have indicated your campus of preference to be the **Bellville Campus**, or any campus previously of Peninsula Technikon, please select from the following Residences.

### BELLVILLE CAMPUS

Anglo		Heroes' House	
De Beers		Matthew Goniwe (MGR)	
Freedom Square		Richard Sacco	
Bellville College		Postgraduate Residence	

STUDENT NUMBER		ID/PASSPORT NUMBER	
----------------	--	--------------------	--

CONTACT DETAILS OF APPLICANT	INITIALS				TITLE														
					e.g. Mr, Ms														
SURNAME																			
ADDRESS																			
POSTAL CODE					TELEPHONE CODE & NUMBER (h)														
					TELEPHONE CODE & NUMBER (w)														

**SECTION J: RESIDENCE CONTRACT**

I, the undersigned,.....  
the abovementioned period, and undertake:

(the Applicant), hereby apply for admission to Residence for

- 1. To pay the required deposit within 14 days from the date of the notification of the reservation of accommodation for me in the Residence, failing which the reservation may be cancelled.
- 2. To give the Registrar of the University notice, in writing, at least thirty (30) days before the proposed date of admission, of any intention not to take up the accommodation, and accept that, on failure to take up the accommodation without such notice, the University may summarily cancel such accommodation, in which event I shall forfeit the said deposit as liquidated damages.
- 3. To allow the University, should the accommodation be taken up, to set off the said deposit against the first residence fees becoming due and to retain the balance as a deposit until after the period of residence and I accept that I shall forfeit the deposit as liquidated damages if I fail to take up the said accommodation.
- 4. In order to ensure accommodation on returning to the Residence, to pay the deposit within such period as may be stipulated in the notification of the reservation of accommodation for me in the Residence. This deposit will be offset against my residence fees on my recommencing such accommodation and I accept that I shall forfeit this deposit as liquidated damages if I fail to take up the said accommodation.

- 5. In the event of my discontinuing residence for any reason before the end of a semester, or having my accommodation terminated, to forfeit the deposit as liquidated damages, without prejudice to the right of the University to claim payment of any other amounts I may owe it, whether as a result of my breach of contract or otherwise.
- 6. In the event of having booked accommodation for both semesters in any year, to give the Registrar written notice by no later than 1 April in that year, of any intention not to return to the Residence for the second semester and I accept that, on failure to give such notice, the University shall have the right to summarily cancel my accommodation, in which event I accept liability of payment, as liquidated damages, of the second semester's residence fees, without prejudice to the right of the University to claim payment of any other amounts I may owe it, whether as a result of my breach of contract or otherwise.
- 7. To accept the tariff of residence fees and other charges laid down by the University from time to time.
- 8. To pay residence fees in full prior to taking up accommodation each semester. No student will be admitted unless the full fees are paid in advance.
- 9. To accept as final the decision of the Registrar of the University in all cases of dispute in connection with or arising out of this agreement.
- 10. To accept and comply with the House Rules laid down by the University in respect of the Residence from time to time.

I acknowledge that a reduction of fees will not be granted should residence be taken up after commencement of a semester or in the event of termination of residence before the end of a semester, unless specifically agreed to by the University under special circumstances.

I acknowledge that residence fees and other charges are subject to increase from time to time without prior notice.

I acknowledge that the University shall have the right to summarily terminate my accommodation and eject me from the Residence should I breach any aforesaid undertakings, or should I cease to pursue my aforesaid course of study, without prejudice to the rights of the University in respect of any amounts I may owe it and the right of the University to claim forfeiture of any balance of the deposit still held by it.

**SIGNED AT ..... ON THIS ..... DAY OF .....200 .....**

.....  
**SIGNATURE OF APPLICANT**

I, the undersigned ..... (the legal guardian of the Applicant), do hereby assist the Applicant as far as may be necessary in the contracting with the University on the terms above stated, and I undertake personally to the University to fulfill all the financial obligations of the Applicant to the University in respect of the period while the Applicant is still under the age of eighteen (18) years.

**SIGNED AT ..... ON THIS ..... DAY OF .....200 .....**

.....  
**SIGNATURE OF PARENT/GUARDIAN**