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Isa Carstens Academy: Application Form – IMM GSM Additional Tuition Centre

Please complete in black, capital letters

Course Name:	Higher Certificate in Marketing NQF level 5																				
	Bachelor of Business Administration in Marketing Management (BBA degree) N										NQF	QF level 7									
	Bachelor of Commerce in Marketing and Management Science (BCOM degree)) NC	ξF lev	el 7							
Campus:	Ste	llenb	osch		Full ti	ime 🗌															
	Pre	toria		Full time Part time																	
	Cla	remo	nt		Full time Part time																
						tudon	dotai	lc .													
Title:	Student details											Gender: N			P	ale					
												Gen	uer.	Mal		1 6111	aic				
Student Surname:																					
Full Name(s):																					
Preferred Name:																					
ID/Passport number:									Date	of birt	th	Day	/	Month	/	Ye	ar				
Nationality:																					
Home Language:												Please no	te that cla	isses will b	e condu	ucted in En	glish.				
Ethnic Group	Black White Coloured							Ind	ian		A	sian		Other							
Study Visa:	YES	NO	Inte	rnational s	tudents v	will receiv	e additio	nal info	ormation	to assist	with	their vis	sa applio	cation.							
Student Contact	Cell:																				
	Work	:																			
numbers:	Home	e:																			
E-Mail Address:													1								
Address:																					
	Postal/Zip code																				
Marital status:									Cl	nildren	1:										



Title:			9	Surna	me:																
Name:																					
ID/Passport number:																					
Parent/Guardian Contact numbers:	Cell: Work:																				
E-Mail Address:	Trome.																				
Address:																					
Address.																					
		Postal/Zip code																			
										1	osta	ai/Z	ір сс	ode							
	-				Accor			on												1	
Private/Hostel:	Do you ne	eed Isa	Residen	ce aco	commo	odatio	n?											١	/ES		NO
					Ed	lucati	on														
Current/ grade/level /																					
Highest qualification																					
Current/ Year Completed School		Name of School																			
Where did you hear	Word o	Word of mouth (former / current student Advertisement (magazine / Exhibition (school /																			
about Isa Carstens	/ salon ,	/ salon / clinic / career consultant / talk / newspaper / radio / career / expo / open																			
Academy	school v	isit / S	AAHSP /	family				face	bool	k / w	/ebs	ite)			d	ay)					
Ctata of Haalth					IV	/ledica	al														
State of Health	, u																				
Do you take medication																					
Underwritten by medica			YES	NO																	
Disability:	None	YES (p	olease sta	ite):																	
						inanc															
Full Information on Co made available in Nov		dent lo	an optio	ns will	l be pro	ovided	l to (each	stud	lent.	. Fee	s fo	r th	e fol	lowi	ng y	/ear	of s	study	/ wi	ll be
made available in Nov	ember.	Re	sponsib	le Pe	rson f	or Pay	vme	nt o	f Co	urs	e Fe	es									
Title:		- 110	эропы			o ,	, c			, u. 5											
Surname:																					
Name:																					
Name.																					
Contact numbers:	Cell: Work:																				
	Home:																				
E-Mail Address:																					
Address:																					
											Post	al/Z	ip co	ode							
Relationship to student																					

Parent / Legal Guardian Details:



N O N D L	IVI I SINCE 1976									
Student declaration / MEMORANDUM OF AGREEMENT										
	NB: it is compulsory to be signed by all parties concerned									
Should my application	on be successful:									
ı.	(Student name & surname), hereby									
declare that:		•								
1. All particular	ars given by me in this form are true and correct									
2. I will acquair	int myself with the rules and regulations, including the disciplinary rules, of the Isa Carstens Academy vate School of Marketing will abide by them	y and								
	claim against the Isa Carstens Academy resulting from any act or omission on my part during tuition	or								
4. I accept resp	accept responsibility for the care and safekeeping of all Isa Carstens Academy property (including, but not restricted to: books and notes) issued to me for my training.									
5. I will inform	·									
6. I am aware t										
7. I am aware t										
8. Taccept full i										
	aim compensation for photos taken, voices used, student participation in functions, etc. and accept the	nat any								
-	d for publicity reasons will be the property of the Isa Carstens Academy icy of the Academy to forward the progress report of the student to the party responsible for the fina	ncial								
support of th	the student, unless otherwise arranged. An amount of R250-00 per year is payable if duplicate ence is requested for the parent(s)									
•	to make an initial payment in respect of the Registration/admin fee as indicated below being part of	the								
fees on acce	eptance and the balance before Registration day									
_	gher Certificate in Marketing (R1 000-00)									
	chelor of Business Administration in Marketing Management (R1 000-00) chelor of Commerce in Marketing and Management Science (R1 000-00)									
	n, modification or waiver of any provision hereof shall be of any force and effect unless reduced to wr	riting								
and signed b	by both parties									
	Application Documentation									
Please attach the foll	llowing documentation to the Application form:									
	document / Passport t School report / Certificate									
Copy of Last	t School report / Certificate									
Send Application & D	Documentation to:									
E-Mail	info@isacarstens.co.za (Stellenbosch campus) infopta@isacarstens.co.za (Pretoria campus)									
Fax	086 742 2060 (Stellenbosch campus) 086 540 8289 (Pretoria campus)									
I, here	reby declare that all the information provided is complete and accurate to the best of my knowledge:									
Signed at:	Place Date: Day / month / 2 0)								
Student signature:										

Parent / Guardian

signature