



Student Details

Student number	D C S S O E O O I	Surname	DA COSTA
Date of birth	1 1 0 7 1 9 8 8	First names	JOEL
DDMMYYYY		SA-ID/Passport no.	8807116115189
Registration date	1 3 0 2 2 0 1 8	Tel/Cell no.	082 372 1320
DDMMYYYY			
Email address	JOEL.DA.COSTA@gmail.com		
Local address	7 THE WAREHOUSE STUDIOS 97 HOPE ST., CBD, CAPE TOWN		

Are you registering for this degree as part of a co-badged or joint degree agreement with another institution? If so, please provide the name of the partner institution.

Previous Academic Record (at this or any other university)

Degree awarded (use official abbreviation in country of origin)	University	Year awarded	Distinctions (if any)
B Bussci	UCT	2010	

Note: If you are registering for this degree for the first time, please submit a completed Memorandum of Understanding (MoU) approved by your supervisor and Head of Department, along with a copy of your research proposal. The form is available at <http://www.science.uct.ac.za/sci/postgrad/current/registration>

If you are re-registering for the degree, please submit a Progress and Planned Activity Form (P&PA) approved by your supervisor and Head of Department. The form is available at <http://www.science.uct.ac.za/sci/postgrad/current/registration>

Degree code and specialisation

Please select the courses you intend taking this year. Courses are listed alphabetically by specialisation.

Degree (select one)	Coursework electives
DEFTSIO SC FENCES ANALYTICAL MS	
Degree code	
S M O O 4 S T A O 8	
Dissertation (select one)	
STASOO4W: Adv. Analytics Minor Dis.	
Coursework	

Note: It is your responsibility to regularly check, via PeopleSoft, that you are registered for the correct courses.

Signatures

Student

Supervisor

HoD

Dean

Captured by:

Date: