Application for (year):

1st semester



If you complete this form, all previous qualification choices will be cancelled,

even if you have already been accepted in a qualification.

APPLICATION TO CHANGE YOUR CHOICE OF QUALIFICATION (HIGHER CERTIFICATE, NH CERTIFICATE, N DIPLOMA, DIPLOMA OR BACHELOR'S DEGREES)

Please submit this f A certified copy A certified copy E-mail: admiss Please note: yo qualification core	of y of y ion@ u w	our li ou st Otut.a ill onl	D or taten ac.za y be	pas nent a con	spor of s	t ymb red f	or y	our :	2nd	choi	ce if	you	have	not		n se	lecte	2 nd s	seme	este	r	oice	, and	d on] y if t	ne			
STUDENT NUMBER																													
ID or PASSPORT NUMBER																													
CHOICE OF QUALIFICATION: Choice 1																													
CHOICE OF QUALIFICATION: Choice 2																													
Type of enrolment: Day class Ever						ening	ning class Block course																						
Do you require financial aid? Yes							No																						
Campus: Pretoria, Soshang					guve	, Ga	Rar	nkuwa Polokwai						ne	Mbombela								eMalahleni						
PERSONAL DETAILS:																													
Title: Initials:									Surn	ame	:																		
Postal address																													
																				Po	stal	code	e:						
Contact details: Home phone																													
Cell phone number																													
E-mail address																													
SIGNATURE OF STUDENT DATE																													
FOR OFFICE USE								SIGNATURE AND DEPARTMENTAL DATE STAMP														DATE							
NOT ACCEPTED										S.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O																			
MUST GO TROUGH SELECTION PROCESS																													
ACCEPTED																													
WAITING LIST																													
ADMISSIONS OFFICE DATA CAPTURER																													
										C	OMI	MEN	TS																