



NetworX Option

APPLICATION FORM FOR STUDENTS

Date of commencement 2012/01/01 End date 2012/06/30

Membership Number 4900086 Reference Number 16122063201112220731

PERSONAL PARTICULARS

Surname Pönni Amount Paid 1908

First name/s Sanna Maria Gender Female

Title Ms. Marital status Single Passport issued in Finland

Date of birth 1984/06/11 ID/Passport no 16122063

South African

postal address Drostdy Road, Rhodes University, , , Grahamstown, Eastern Cape ,6140

South African

physical address Drostdy Road, Rhodes University, , , Grahamstown, Eastern Cape ,6140

Email address sanna.ponni@utu.fi

Telephone details (B) (H)

Facsimile details (B) Cell

Study Institution Rhodes University Student no

Country of Origin Embassy

Gross Monthly Income 0.00

DEPENDANT DETAILS

Name	Surname	Relationshin	Gender	Date of birth			

MEDICAL DETAILS

Please indicate and provide details of whether any medical treatment, including acute conditions, you or any of your dependants have ever experienced or have received during the last twelve months or anticipate receiving within the next twelve months.

have ever experienced or	nc
have received during the last twelve months or	
anticipate receiving within the next twelve months	nc

If you answered "Yes" to any of the above questions, please provide details below:

Name	Details of condition	Date of treatment	Degree of recovery
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Selected Doctor name

Supplier: 269891