

# APPLICATION FOR UNDERGRADUATE STUDIES 2020

### **GUIDE TO THE COMPLETION OF THE APPLICATION FORM**

Please read the information and instructions contained in the following pages carefully before completing the application form.

#### PLEASE NOTE:

- 1) This form must ONLY be completed by applicants applying towards programmes that cannot be submitted online.
- 2) International and Recognition for Prior Learning (RPL) applicants must complete this form.
- 3) Consult the CPUT website for more details and to apply online at: www.cput.ac.za/study/apply
- 4) If you have had a break of a year or more in your studies, you MUST RE-APPLY TO CONTINUE YOUR STUDIES.
- 5) Certain programmes are offered at certain campuses only, while others are presented at more than one campus. Consult the list on page 11 of this Application Form and indicate your campus of choice. Although everything will be done to accommodate you at the campus of your preference, placement remains at the discretion of the University.
- 6) Prospective applicants, who have handed in their application form, should track their application status at www.cput.ac.za/study/track. If accepted, your acceptance letter can be downloaded from this web page.
- 7) International prospective applicants can download the Office of International Affairs' (OIA) guideline document at www.cput.ac.za/students/life/international.

## **SECTION A: INSTRUCTIONS**

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

#### 1 General

- 1.1 NB: Only one (1) application form per applicant is allowed. Any additional applications will not be processed.
- 1.2 This form must be completed by all applicants applying to the Cape Peninsula University of Technology for the first time. Returning students with a break in their studies of a year or more, must re-apply to continue their studies (no application fee payable).
- 1.3 It is in the interest of the applicant to ensure that this form is completed in full and that certified copies of all supporting documents are enclosed (ensure that certified copies are less than three (3) months old). 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 BLOCK I FITTERS.
- 1.4 Separate questionnaires for MEDICAL IMAGING AND THERAPEUTIC SCIENCES and OPTICIANRY can be downloaded from CPUT's website www.cput.ac.za and must be completed in addition to the application form.
- 1.5 The undergraduate Nursing qualification is presented at the Bellville Campus.
- 1.6 The closing date for applications for the 2020 academic year is 30 SEPTEMBER 2019 except for:
  - 1.6.1 Nursing programmes, which is 30 JUNE 2019
  - 1.6.2 Recognition of Prior Learning (RPL), which is 30 JUNE 2019
  - 1.6.3 Fashion Design, Visual Communication Design, Jewellery Design & Manufacture, Product Design, Interior Design, Architectural Technology, which are **31 JULY 2019**
  - 1.6.4 International applications, which is 31 AUGUST 2019 refer to point 4, 5 and 6 on page 2 of this application form
- 1.7 For any further enquiries, contact the Admissions Office at +27 (0)21 959 6082/6270 (Bellville Campus), +27 (0)21 460 3236/3861 (District Six Campus), +27 (0)21 680 1592/1546 (Mowbray Campus), and +27 (0)21 864 5503/5501 (Wellington Campus).

#### 2 Admission requirements

- 2.1 Consult faculty and prospectus brochures for minimum admission and specific qualification requirements.
- 2.2 Applicants with Senior Certificate subjects on Higher and/ or Standard Grade (pre-2009) are still accepted.
- 2.3 All applicants who comply with the minimum requirements are still subjected to a selection process.
- 2.4 In addition to the minimum requirements, all applicants for the Architectural Technology and Design programmes must submit a prescribed portfolio. Please ensure that you obtain the portfolio requirements booklet with this application form or download it from the CPUT website.
- 2.5 CPUT offers the opportunity for qualifying individuals to apply for Recognition of Prior Learning (RPL). Before applying, please read what the RPL process entails on the CPUT website, www.cput.ac.za/study/rpl. RPL is a qualification-specific process, and your work experience should be relevant to the qualification that you are applying for. In order to start the RPL process, you need to submit information about yourself, as specified on the RPL pages, together with this application form to the relevant campus.
  - You may apply for RPL: a) If you are 23 years old or older; b) You have sufficient work experience, of at least 5 years; c) Your work experience is relevant to the qualification that you are applying for.
  - NB: Please submit all the required information before or by 30 JUNE. No late applications will be considered.

#### 3 Documents to be submitted with your application form

- 3.1 A certified copy (less than three (3) months old) of the first page of your Identity Document/ Card must accompany your application.
- 3.2 A certified copy (less than three (3) months old) of your National Senior Certificate (NSC) or equivalent qualification must be submitted with your application. If you are currently in Grade 12, your marks obtained in Grade 11 together with your most recent Grade 12 marks must be submitted.
- 3.3 If you attended any other higher education institution, an original Academic Record and a Certificate of Conduct, or certified copies (less than three (3) months old) of other certificates/ diplomas/ degrees obtained previously, must also be submitted.
- 3.4 Should the name on the NSC or equivalent qualification differ from the name on the application form, proof should be provided to explain the change in name.
- 3.5 International applicants must also meet the requirements set out in section 4 on page 2.
- 3.6 Consult page 11 for additional requirements for certain qualifications (downloadable from CPUT's website).
- 3.7 CPUT reserves the right to verify and take legal action if documents are not authentic.

#### 4 International applicants (foreign citizens)

- 4.1 Certified copies of the following applicable documents must accompany this form (must be less than three (3) months old):
  - a) Permanent residency applicants: Passport and proof of permanent residency/ SA Identity Document/ Card.
  - b) Refugee asylum seeker temporary permit/ formal recognition of refugee status in the RSA.
  - c) Passport:
    - International/ Foreign Post-Basic Nursing applicants need to submit a document indicating approval of nursing qualifications from, and certified by, South African Qualifications Authority (SAQA), in order to be provisionally accepted. Full acceptance will only be considered if the applicant also submits proof of temporary registration with the South African Nursing Council (SANC) for two (2) years, in addition to a valid study permit.
    - Congo-Brazzaville applicants must submit the Liste des Admis au Bac.
    - Applicants from DRC CONGO must also submit JOURNAL with their qualifications.
    - Applicants with qualifications from the West African Examination Council (WAEC) and the National Examinations Council (NECO) should submit a scratch card.
    - Applicants from Angola, Cameroon and all the countries not mentioned above, must submit a letter from their respective embassies CONFIRMING AUTHENTICITY of documents and certificates of the candidate. For any further enquiries contact the Office of International Affairs (OIA) on +27 (0)21 959 6085 (Bellville Campus) or +27 (0)21 460 8390 (District Six Campus).
    - All international applicants are required to submit a SAQA certificate when applying to CPUT for all the programmes.

NB: The closing date is 31 AUGUST. No late applications will be accepted.

#### 5. Approved qualifications obtained outside the Republic of South Africa (RSA)

- 5.1 An applicant may qualify for admission on the basis of qualifications obtained outside the RSA, whether they are SA citizens or not. Each case will be dealt with on an individual basis.
  - · Your school-leaving certificate should be submitted with the English translation of the certificate.
  - BTech Nursing (undergraduate) applicants must submit a SAQA evaluation certificate together with their school-leaving qualification (SANC requirement).
  - An evaluation by SAQA is mandatory for all non-South African qualifications. SAQA can be contacted at: Postnet Suite 248, Private Bag X06, Waterkloof 0145, South Africa. Tel: +27 (0)12 431 5000; Web: www.saqa.org.za

#### 6. Foreign/ International school-leaving certificates held by SA citizens

- 6.1 SA citizens who are holders of foreign/ international certificates (e.g. Cambridge International Examinations) can be admitted ONLY IF they meet the minimum requirements for studying at a university in South Africa, and in addition, meet the minimum admission requirements of the programme they are applying for (according to the faculty-specific requirements). Each case will be dealt with on an individual basis.
  - BTech Nursing (undergraduate) applicants must submit a SAQA evaluation certificate together with their foreign/ international school-leaving qualification (SANC requirement), even if they are SA citizens.
  - An evaluation by SAQA is mandatory for all non-South African qualifications. SAQA can be contacted at: Postnet Suite 248, Private Bag X06, Waterkloof 0145, South Africa. Tel: +27 (0)12 431 5000; Web: www.saqa.org.za

#### 7 Application Fee

- 7.1 There is no application fee payable for online applications
- 7.2 A non-refundable R100 application fee (or R150 late applications fee should CPUT advertise availability of space in programmes applied for after the closing application period) must accompany this manual form. Please ensure that you attach the original proof of payment. The following payment methods are accepted:
  - Only crossed postal orders and bank guaranteed cheques will be accepted, and they must be made out to Cape Peninsula University
    of Technology.
  - Cash payments can be made on or before the closing date, directly to the Cashiers' Office on the campus where this facility exists.

Bank deposit:

ACCOUNT NAME Cape Peninsula University of Technology

BANK NAME ABSA Bank

BRANCH Public Sector Cape Town

BRANCH CODE 632005
ACCOUNT CODE (SOUTH AFRICANS) 405 354 8487
INTERNATIONAL STUDENTS 01 202 660521

SWIFT CODE (FOR PAYMENT OUTSIDE SA)

ABSA ZA JJ (for payments outside South Africa)

DEPOSIT REFERENCE SA ID, Student Number, Surname, and Initials OR Passport number

NB: Please attach the original proof of payment to the Application Form.

_					A	PP	LIC	CAT	ION	FOF	R U	ND	ER	RGRAI	DU	ATE	S1	UD	IE	S 2	<u>2</u> 020
Cape Penins	ula								For offic	ce use	only.										
University of	Tec	chno	olog	ly					STUDE	NT NUM	IBER										
creating f	utu	ires	3			Form	checl	ced	Date				N	lame			Si	gned			
					Ī	Form	captı	ired	Date N				Name		Si	gned					
Have you studied at	/ appli	ied to (	CPUT b	efore,	or at	t the p	revio	us Ca	pe Techr	nikon or	Penin	sula	Techi	nikon?				Yes			No
If YES, please supply									•												
Title (e.g. Mr, Ms)			T						1					Initials		als					T
Surname																					$\dot{\top}$
First names																					$\dot{\pm}$
If you have studied at	the p	revious	s Cape	Techn	ikon	, Penii	nsula	Tech	nikon or	CPUT y	ou do	not r	need t	to pay the	applic	ation	fee.				
NB: Applications will N	NOT be	proce	ssed v	vithout	a ce	rtified	copy	(less	than thr	ree (3) n	nonths	old)	of th	e applican	t's Ide	ntifica	tion D	ocume	ent o	r pass	port.
SA Identity number													ᆜ								
Passport number				_				<u> </u>					Ш								
Date of birth	D	D	М	M	Υ	Y	Υ	Y						required vernment.							
Gender																					
Population group		BLACK			CC	LOUR	ED		IN	IDIAN			V	VHITE			OTHER EASE SPE				
Home language																					$\perp$
PROPOSED QUALIFIC									tudvina						Tick	the	appro	pria	te bo	ОХ	
Choice 1	iii Giloi	ioos tiii	at you	aro so	Hou	Siy GOI	ioiuo	illy 3	Full-time				9	Part-time							
Choice 2														Full-time	)		ı	art-ti	me		
Choice 3													Full-time			Part-time					
For Nursing (Post-B choose the preferre Tick the appropriate	asic) p d qual e box	olease lificatio	n.	BTe Hea	ch: F ilth C	Primar Care	у		BTech: Occupational Health Nursing							ch: ology sing					
Campus/Choice indica	ation ((	COMPU	LSORY	/). Tick	c the	appro	priat	e box													
BELLVILLE CAMPUS		1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>		GRANG	ER B	AY CA	MPUS	1 <sup>st</sup>	2 <sup>nd</sup>	3	3rd	WELLINGT	ON CA	MPUS		15	st	2 <sup>nd</sup>	3 <sup>rd</sup>
DISTRICT SIX CAMPI	US	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	-	MOWB	RAY (	CAMP	US	1 <sup>st</sup>	2 <sup>nd</sup>	3	3 <sup>rd</sup>	APPLYING Refer to po	FOR Fint 2.5	PL on pa	ge 1	,	YES		NO
Please attach the or	iginal	proof	of pa	yment	t.									DISTANCE Applicable				15	st	2 <sup>nd</sup>	3 <sup>rd</sup>
For office use only.	Tick t	the ap	propri	iate bo	x. F	ill in	the a	letail	s and st	tamp as	indi	cated								1	
CHOICE 1	Accep	oted	Prov	risionally	y acc	epted		Reject	ed	Wait	ing list		Furth	ner evaluatio	n	Date					
Qualification code								Offerin	g type							Period	d of stu	ıdy			
Reason for rejection (compulsory)								Name								Signa	ture				
Comment								Name								Signa	ture				
CHOICE 2	Accep	oted	Prov	risionally	y acc	epted		Reject	ed	Wait	ing list		Furth	ner evaluatio	n	Date					
Qualification code							-	Offerin	g type							Perio	d of stu	ıdy			
Reason for rejection (compulsory)								Name								Signa	ture				
Comment								Name								Signa	ture				
CHOICE 3	Accep	oted	Prov	risionally	y acc	epted		Reject	ed Waiting list Furth			Further evaluation Date									
Qualification code	n code Offer				Offerin	g type						_	Period	d of stu	ıdy						

Receipt/ Bank depo	sit number	Date	Amou	nt	Cashier	me)			
FACULTY STAMP		I	FACULT SIGNAT		ME AND SURNAME				
Comment				Name				Signature	
(compulsory)				Name				Signature	

Receipt/ Bank deposit number	Date	Amount	Cashier (Print, Initial and Surname)
		·	

Are you applying for resi	dence	Ye	es N	o If y	es, ple	ase co	omplet	e the 'l	Reside	псе Арј	olicatio	n' and	<b>'Cont</b> ı	act' se	ection (	of the A	Applica	tion Fo	orm.	
Tick the appropriate box.																				
Study period	1st yea	ır				2nd	year				3rd y	year				4th	year			
PRESENT ACTIVI Tick the appropriate box.		BEF0	RE '	YOU	STA	RT Y	OUF	STI	JDIE	S (Inf	ormat	tion re	quire	d for	Gover	nmen	t repo	rting	purpo	ses)
University student									Grade	e 12 stu	dent									
University of Technology	stude	ent							FET/	TVET co	llege :	studen	t							
Other (e.g. Labour force, u	nemplo	yed), sp	ecify																	
CONTACT DETAIL																				
RESIDENTIAL DETAILS (V	wnere	you liv	e pern	nanent	ly)															
Address												Poot	al code							
Telephone (home)												7050	ar coue							
Telephone (work)																				
Cellphone																				
Email address																				
ACCOUNT DETAILS (Detainformation must be en	ails of tered h	person nere in	respo case (	nsible of mind	for the	payn icants	nent of	fees;	not em	ployer,	spons	or or b	ursary	addre	ss; Leg	jal Gua	rdian/	Parent		
Surname																				
Title (e.g. Mr, Mrs)						Initial														
Relationship (e.g. father	)																			
Postal address (contactable permanent address; not a PO Box address)														Post	tal code	e				
Telephone (work)																				
Telephone (home)																				
Cellphone																				
Email address																				
CONTACT DETAILS: Next	of Kin	(e.g. f	ather,	mothe	r, spou	se). T	his info	ormatio	on is re	equired	in cas	e of er	nerger	cy, etc	).					
Surname																				
Title (e.g. Mr, Mrs)					Initial															
Relationship (e.g. father	)																			
Postal address (contactable permanent address; not a PO Box address)														Post	al code	9				
Telephone (work)														1 031	ar-coul					$\vdash$
Telephone (home)																				
Cellphone																				
Email address		1																		

#### HIGH SCHOOL OR EQUIVALENT INFORMATION

Grade 12 examination number											
Date of Grade 12 examination	Y	Y	Y	Υ	М	М					
Name of High School/ College											

VERY IMPORTANT: If you are currently in Grade 12, please submit a certified copy of your Grade 11 final results and recent Grade 12 results. School leaving applicants must submit a certified copy of their school leaving certificate (must be less than three (3) months old).

#### PREVIOUS HIGHER EDUCATION

If you have already been a student at a Higher Education Institution (e.g. a Technikon, University, University of Technology or College), please complete this section. Provide the details of your most recent enrolments.

Period		Name of institution	Name of qualification	Completed successfully	Charles to a sumbar
From year	To year	Name of institution	Name of qualification	Completed successfully (yes or no)	Student number

Please attach certified copies of your academic record, certificate of conduct and previously obtained certificate/ diploma/ degrees (certified copies must be less than three (3) months old).

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

#### **EMPLOYMENT**

If you are currently employed (full-time or part-time), please provide the name of your employer.

#### **INTERNATIONAL APPLICANTS** (Information is required by the University and Government)

Please specify your country of origin										
Citizenship										
Tick the appropriate box										
(A) AFRICAN (African countries)		(E) EXCHANGE STUDENT								
(F) FOREIGN (outside Africa)	(F) FOREIGN (outside Africa) (N) PERMANENT RESIDENT									
(R) REFUGEE (Refugee permit) (0) OTHER (specify)										

Please note that international applicants will be required to be in possession of a valid CPUT Study Permit in order to register. Please visit www.cput.ac.za/students/life/international for more information; you will find a downloadable version of the Office of International Affairs (OIA) Guideline.

#### WHERE DID YOU HEAR ABOUT CPUT, OR WHAT MADE YOU DECIDE ON CPUT AS A STUDY OPTION?

Choose as many as are applicable:

Newspaper adverts	Open Day	
Visit to school or staff members	Billboards	
From your friends or family	Facebook	
From the Internet (website)	Twitter	
Radio adverts	YouTube	
From career expos	Other	
From school guidance teacher	If other, please specify	
Visit to the University		

#### **DISABILITY STATUS (COMPULSORY)** (Information is required by the University and Government)

NE (000)	INTELLECTUAL (Learning difficulty) (005)
IGHT (001)	EMOTIONAL (Behaviour, Psychological) (006)
IEARING (With hearing aid) (002)	MULTIPLE (007)
COMMUNICATION (Speech, Listen) (003)	DISABLED BUT UNSPECIFIED (009)
PHYSICAL (Move, Stand, Grasp) (004)	
n brief, please provide some detail regarding your d	sability, below.

# PROCESSING OF APPLICATION AND/ OR RESIDENCE APPLICATION FORM

- Applications will not be processed without the required certified copies of documents listed in the GUIDE TO THE COMPLETION OF THE APPLICATION FORM (Pages 1 and 2).
- Applications will not be processed unless the Legal Undertaking on this
   Application form has been completed and signed by all the parties concerned.
- Applications for Accommodation in a University Residence will not be processed unless the Contract on this Application form has been completed and signed by all the parties concerned.

# **FINANCIAL AID**

Applicants who requires NSFAS funding should apply directly to the NSFAS website: www.nsfas.org.za

	LEGAL UNDERTAKING (COMPULSORY)	
I,	I,	
ID	ID/ Passport number	
de	declare that all the particulars supplied by me in this form are true, complete and correct. I accept that any incould lead to the cancellation of this application.	correct or misleading information
1.	<ol> <li>I undertake:         <ol> <li>to comply with all the rules and regulations, including the disciplinary rules, of the Cape Peninsula Ur including any amendments thereof as published from time to time and to acquaint myself with all the to notify the relevant department immediately should:</li></ol></li></ol>	provisions thereof;
2.	2. I undertake that I will not hold the Cape Peninsula University of Technology liable nor make any claim agai compensation and/ or any expenses incurred or damages suffered as a result of or in respect of any injury irrespective of whether any such damages, injury or death may have been attributable to any degree of ne University or one or more of its employees or other person(s) for whose actions it might, but for this under	y to me or illness or my death,
3.	3. I am aware that my enrolment is only valid if it complies with the applicable prescripts and regulations go concerned, notwithstanding the acceptance of this enrolment by the University.	verning the qualification
4.	4. I accept that, if I abandon, cancel or change my qualification or my studies at the University at any time, n will be considered and that I will remain liable for the payment of all fees in full.	o cancellation or reduction of fee
5.	<ol><li>I agree and consent that the University may provide me with statements of account and any other communication through data messages or online services. These data messages may be sent to my cellule email address.</li></ol>	niqués by way of electronic ar number, or my cput student
6.	6. I undertake to accept the responsibility for the payment of fees (tuition, residence and any other applicable	e fees).
7.	7. I hereby give permission that information about my academic progress be divulged to the person/ bursar licensent to personal information being used for Government and University statistical purposes.	iable for payment of fees. I
8.	8. I agree, understand, consent and irrevocably authorise the Cape Peninsula University of Technology to keel information in paper and electronic format, including information supplied by me during the application and	p, use, process and verify d registration process.
9.	9. I agree, understand, consent and irrevocably authorise the Cape Peninsula University of Technology to according to my spouse, parents or legal guardians or any person or body responsible for the payment of my tuition my academic and general progress at the Cape Peninsula University of Technology and to communicate to guardians or any person or body responsible for the payment of my tuition fees or bursary and any prosper information required by such third party.	fees or bursary regarding my spouse, parents or legal
1(	10. I hereby irrevocably authorise and expressly give my consent that the Cape Peninsula University of Techno any information including my personal information that may reasonably be required by third parties for the opportunities and making bursaries/sponsorships available to prospective applicants at Higher Education In Peninsula University of Technology.	purpose of research, educational
1	11. I hereby irrevocably authorise and expressly consent that the Cape Peninsula University of Technology may personal information which information may reasonably be required for CPUT research purposes, including	/ use, provide or disclose my g statistical or historical purposes
12	12. I hereby undertake to inform CPUT of any disciplinary proceedings (finalised or pending) against me at any Learning which I may attend or have attended prior to applying at CPUT, failing which, my registration at C	r other Institution of Higher PUT may be terminated
SI	SIGNED AT	
01	ON THISDAY	0F 20
SI	SIGNATURE OF APPLICANT	
Н	Herein assisted as far as may be necessary while the applicant/student is still under the age of eighteen (18) y	/ears
at	I, ID/ Passport Numberthe undersigned, hereby acknowledge myself to be jointly and separately responsible for monies which the abat any stage be owing to the Cape Peninsula University of Technology in terms of the agreement that they've constrained university of Technology, as set out above, including any change thereto.	ove-mentioned applicant may concluded with the Cape
٠.	CIONED AT	

NB: It is compulsory that this contract is signed by all parties concerned.

ON THIS \_\_\_\_

SIGNATURE OF PARENT/LEGAL GUARDIAN ...

DAY \_\_\_\_

OF 20



STUDENT NUMBER					

# RESIDENCE APPLICATION AND CONTRACT 2020

If you require accommodate sign the contract	If you require accommodation in a University residence complete the form below and sign the contract									
Indicate duration of stay Tick the appropriate box	Full year		Semester 1		Semester 2					

Title (e.g. Mr, M	s)												Ir	itials						
Surname																				
First names																				
Address																				
											Pos	Postal code								
																	_			
Telephone code	and r	numbe	er (h)																	
Telephone code	and r	numbe	er (w)																	
Cellphone numb	oer																			
Email address												1								

I, the undersigned, \_\_\_\_\_\_(the Applicant),

hereby apply for admission to a University Residence for the above-mentioned period, and undertake:

- To give the Residence Placement Officer notice, in writing, at least thirty (30) days after receiving the notification that you have been admitted,
  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.
- 2. 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.
- 3. 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 in the Residence for the next year. This deposit will be offset against my residence fees on my recommencing such accommodation and I accept that I shall adhere to the original agreement as stipulated in point 2 above.
- 4. 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.
- 5. In the event of having booked accommodation for both semesters in any year, to give the Respective Residence Coordinator 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.
- 6. To accept the tariff of residence fees and other charges laid down by the University from time to time.
- 7. 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.
- 8. To familiarise, accept and comply with the Residence Rules and Regulations 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 reject 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	0F 20
ON THIS	יאו	01 20
SIGNATURE OF APPLICANT		
I, the undersigned		
ID/Passport Number	, (the legal guardian	of the Applicant),
·		
do hereby assist the applicant as far as may be necessary ir personally to the University to fulfil all the financial obligation still under the age of eighteen (18) years.		
SIGNED AT		
ON THIS	DAY	0F 20
SIGNATURE OF PARENT/LEGAL GUARDIAN		

#### FOR INFORMATION PURPOSES

Please check the CPUT website for new qualifications.

FACULTY	CAMPUS
FACULTY OF APPLIED SCIENCES	
Agricultural Management	Wellington
Agriculture	Wellington
Analytical Chemistry	Bellville
Biotechnology	District Six
Consumer Science: Food & Nutrition	District Six
Environmental Health	District Six
Environmental Management	District Six
Food Technology	Bellville
Horticulture	Bellville
Landscape Architecture	Bellville
Mathematical Sciences	Bellville
Nature Conservation	District Six
Marine Sciences	District Six

FACULTY	CAMPUS					
FACULTY OF ENGINEERING AND THE BUILT ENVIRONMENT						
Construction		Bellville				
Geomatics (Combining Survey and Cartography)		Bellville				
Clothing and Textile Technology	L	Bellville				
Engineering: Chemical		Bellville				
Engineering: Civil		Bellville				
Engineering: Electrical		Bellville				
Engineering: Industrial		Bellville				
Engineering: Computer Systems		Bellville				
Engineering: Mechanical		Bellville				
Engineering: Mechanical (Marine)		Granger Bay				
Engineering: Mechatronics		Bellville				
Maritime Studies		Granger Bay				
Quality (BTech only)		Part-time: Bellville				

FACULTY OF BUSINESS AND MANAGEMENT SCIE	NCES	
Accountancy leading to Accounting or Cost and Management Accounting or Internal Auditing		District Six and Wellington
Entrepreneurship		District Six
Events Management	L	District Six
Financial Information Systems		District Six
Hospitality Management: Accommodation		Granger Bay
Hospitality Management: Food & Beverage		Granger Bay
Hospitality Management: Professional Cookery		Granger Bay
Human Resource Management	PL	District Six
Management	PL	District Six Part-time: Bellville
Marketing	PL	District Six
Business and Information Administration	PL	District Six and Wellington
Operations Management		Bellville
Printing Management – only available to employees in the printing and packaging industry	PL	District Six
Public Administration	PL	District Six
Real Estate		District Six
Real Estate		Distance (online)
Retail Business Management		District Six
Sports Management	Q	Mowbray and Wellington
Tourism Management	L	District Six and Wellington

Sports Management	Q	Mowbray and Wellington
Tourism Management	L	District Six and Wellington
FACULTY OF EDUCATION		
BEd: Foundation Phase Teaching (Grade R – 3)		Mowbray (English) Wellington (Afrikaans)
BEd: Intermediate Phase Teaching (Grade 4 – 7)		Mowbray (English) Wellington (Afrikaans)
BEd: Senior Phase and Further Education & Training Teaching (Grade 8 – 12)		Mowbray (English) Wellington (Afrikaans)
Diploma in Education: Grade R (Part-time)		Mowbray (English) Wellington (Afrikaans)

- L LETTER/ ESSAY = Applicants are required to submit a motivational letter/ essay explaining why they want to study a specific course.
- Q QUESTIONNAIRE = Applicants applying for any of these programmes must submit a questionnaire
- P PORTFOLIO = Applicants applying for any of these programmes must submit a portfolio.

FACULTY OF HEALTH AND WELLNESS SCIENCES		
Medical Laboratory Science		Bellville Campus
Dental Assisting		Tygerberg Hospital
Emergency Medical Care		Bellville
Basic Nursing		Bellville
Post-Basic Nursing (See requirements in the faculty prospectus)		Bellville
Opticianry	Q	De Villiers Street Building, Cape Town
Medical Imaging & Therapeutic Sciences (Diagnostic, Therapy, Nuclear Medicine, Ultrasound)	Q	Bellville
Somatology	B&M	District Six

FACULTY OF INFORMATICS AND DESIGN		
Architectural Technology	Р	Media City Building: Cape Town, Foreshore
Fashion	Р	District Six
Film Production	L	District Six
Visual Communication Design	Р	Bellville/District Six
Information & Communication Technology		District Six
Interior Design	Р	Media City Building: Cape Town, Foreshore
Jewellery Design & Manufacture	Р	District Six
Journalism		District Six
Photography		District Six
Public Relations & Communications		District Six
Product Design	Р	District Six
Urban & Regional Planning		Media City Building: Cape Town, Foreshore

- PL PART-TIME STUDIES LETTER OF EMPLOYMENT = Applicants applying for Part-time studies to submit a letter of employment
- **B&M REQUIRED** = Biographical questionnaire and medical report to be submitted with the application form.

# **SECTION B: WHERE TO SEND YOUR APPLICATION**

ADDRESS YOUR APPLICATION TO THE ADMISSIONS OFFICE AT THE POSTAL ADDRESS AS INDICATED.

Basic and Post-Basic Nursing applications can be sent to the Bellville Campus: PO Box 1906, Bellville, 7535, Republic of South Africa.

For easy reference the programmes and the campus where it is offered, is shown on page 11. NB: Please check the campus(es) and address your completed application form to the campus where the programme is offered.

CAMPUS	ADDRESS
BELLVILLE CAMPUS	PO Box 1906, Bellville, 7535, Republic of South Africa
DISTRICT SIX and GRANGER BAY CAMPUSES	PO Box 652, Cape Town, 8000, Republic of South Africa
MOWBRAY CAMPUS	PO Box 13881, Mowbray, 7705, Republic of South Africa
WELLINGTON CAMPUS	Private Bag X8, Wellington, 7654, Republic of South Africa

### **CHECKLIST**

Please note that the University does not consider incomplete applications. Before submitting your application, please check that you have done everything that applies to you, as shown on the list below.

We suggest you tick the box next to each point when you have checked it.

Have you filled in all sections of the form that apply to you?
Have you ensured that you meet the minimum admission requirements for the qualification you are applying for?
Have you signed the "Legal Undertaking" declaring that the information given is complete and correct?
If you are under 18, have you obtained your parent's/guardian's signature?
Have you included your ORIGINAL proof of payment? This is an administration fee and is non-refundable.
If you wish to be considered for a place in residence, have you completed the Residence Application Form?  NB: applying for accommodation in residence does not guarantee that you will be allocated a room in a residence.
Have you provided all the contact details requested in the form?
Have you provided your ID and Passport number and attached a certified copy of your ID and Passport document? (Less than three (3) months old).
If you are still in Grade 12, have you submitted your marks obtained in Grade 11 together with your recent Grade 12 marks?
If you already have a Grade 12 Certificate, have you enclosed a certified copy of it? (Less than three (3) months old).
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?
If you have completed a qualification at another Higher Education institution, have you attached a certified copy of your highest completed qualification? (Less than three (3) months old).
Have you completed a separate questionnaire for the MEDICAL IMAGING AND THERAPEUTIC SCIENCES and OPTICIANRY qualifications?
If you are an International applicant, have you attached a certified copy of your passport, refugee permit or proof of permanent residence and your school leaving certificate. (Less than three (3) months old)?
If you are an International applicant with a non-African qualification, have you attached the SAQA certificate?
Have you completed the prescribed requirements, such as a portfolio/letter for the relevant qualification?