

**2018 APPLICATION FOR ADMISSION (OLU)**  
**BUSINESS STUDIES AND SERVICES**  
**NEW STUDENT**

**For Office Use Only:**

Date Application Received: \_\_\_\_\_

Application Successful (Yes/No): \_\_\_\_\_

If No, Reason Code: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Manager: \_\_\_\_\_

**Important Notice:**

- This application does not guarantee your acceptance at Majuba TVET College.
- Should your application be successful, you will be notified via telephone, to complete the enrolment process. Your place will be reserved for 3 days, provided classes are not full.
- Please consult the *2018 Admission and Progression Policy* of Majuba TVET College, which is available on request, or on [www.majuba.edu.za](http://www.majuba.edu.za)
- A greyed-out block indicates that the specific programme is not offered in the indicated mode of delivery.
- **Attach a** certified copy of your Identity Document; **and** a certified copy of your Highest School Qualification to this Application\*\*\*
- **Campus Information:** (You can hand-deliver or fax or email your Application for Admission)

OLU = Open Learning Unit

(Fax: [086 572 6232](tel:0865726232); Email: [liz.swanepoel28@gmail.com](mailto:liz.swanepoel28@gmail.com))

<b>Surname:</b>															
<b>First Names (As Per ID):</b>															
<b>ID No.:</b>															
<b>Date of Birth:</b> (dd/mm/yyyy)				<b>Gender:</b>		<input type="checkbox"/> Male <input type="checkbox"/> Female		<b>SA Citizen:</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No					
<b>Are You Transferring from Another TVET College?</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Specify the College:		<b>Disability:</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Specify:					
Applicant's Cell No.:															
Applicant's Other No.:															
<b>Applicant's Physical Home Address:</b> (when not studying at the College)		Country:						Code:							

**REPORT 191/NATED PROGRAMMES**

COURSE OF INTEREST	Please Tick (✓) the Mode of Study		Level		
	Weekday Classes	Distance Education (Weekend Contact Session)	N4	N5	N6
Business Management					
Financial Management					
Human Resources Management					
Management Assistant					
Farming Management					

**2018 SUBJECTS**

SUBJECT	LEVEL

**DECLARATION**

I hereby declare that the above information is true, and understand that any false information will affect my application.

Signature of Applicant \_\_\_\_\_

<b>Document ID</b>	<b>Document Owner</b>	<b>Revision No.</b>	<b>Print Date:</b>	<b>Page No.</b>
AS11.1.25	College Enrolment Coordinator	2.0	2017/10/09 12:44 PM	Page 1 of 1