



Application for admission to study in 2011

NOTE

- If you are or were registered at UCT in 2010 DO NOT use this form. Instead, please complete form 5.
- Please write the appropriate codes in the shaded portions. Refer to the booklet Directions for Applicants, for the code tables and notes.
- Please complete this form in CAPITAL LETTERS using ink or a ballpoint pen.
- MBA and AIM applicants must complete an additional form, obtainable from the Graduate School of Business.
- Bachelor of Architectural Studies (BAS) applicants must also complete Form 8.
- LLB applicants must also complete form 7a.
- This form must not be faxed or emailed. Return the completed form by post or in person.

FOR OFFICE USE	
APPLICANT NUMBER	
BATCH	CAPTURER

1

NB • HAVE YOU EVER APPLIED TO OR BEEN REGISTERED AT UCT BEFORE?

YES NO
(Please tick) ☐ Y ☐ N

If YES, enter your Applicant/Student Number:

SECTION A

PERSONAL DETAILS

Prefix (Table F.1)
(Mr, Mrs, Miss, Ms):

Date
of Birth:

Last Name:

First Names:

Preferred First Name:

Other former last name:

Last Name on Senior Certificate or National Senior Certificate:

To complete the following, see Directions for Applicants, page 44, Tables F.1 and F.2

Marital Status
(Table F.1):

Sex

(Table F.1):

*Population Group
(Table F.1):

Home Language
(Table F.1):

*Note: Please give your population (race) group as we need this for equity purposes.

SA Identity Number:

South African ID number. (for SA Citizens or SA Permanent Residents only)

Note: PLEASE ATTACH A CERTIFIED COPY OF THE FIRST PAGE OF YOUR SA ID DOCUMENT.

Failure to provide a valid SA ID number and proof of South African citizenship or Permanent Residency will result in you being considered as an International applicant and liable for the payment of International fees. Citizens and Permanent Residents of SADC countries pay the local fee.

IF YOU ARE A CITIZEN OR PERMANENT RESIDENT IN A COUNTRY OTHER THAN SOUTH AFRICA, PLEASE PROVIDE DETAILS HERE:

Country (Table F.2)

Citizenship status (Table F.1)

Passport number (where available)

Note: PLEASE ATTACH CERTIFIED/NOTARISED PROOF OF THE ABOVE.

SADC Citizens and SADC Permanent Residents please note that failure to provide the above proof will render you liable for the payment of International fees.

Do you need assistance because of a disability, physical or otherwise?

YES

NO

(Please tick)

☐ Y

☐ N

If YES, please specify the disability (Table F.1)

SECTION B

PROGRAMME OF STUDY FOR WHICH YOU ARE APPLYING

(See Directions for Applicants Page 7, Section B)

Choice	Academic Programme (Table B)
1st Choice	
2nd Choice	

Academic Plan or Major (Table B)

Major 2 for HB001 and HB003

SECTION C

CONTACT DETAILS

Home (Street) Address:

Postal/Zip Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Home (Postal) Address:

Postal/Zip Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country Tel Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Dialling Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country Tel Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Cell Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country Tel Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Dialling Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fax Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

E-mail Address:

SECTION D

PARENT / GUARDIAN DETAILS

Details of your Parent / Guardian (if you are under 18 years).

Prefix (Table F.1):

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Last Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

First Names:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Parent / Guardian Address (if different from your address above):

Postal / Zip Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country Tel Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Dialling Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country Tel Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Dialling Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fax Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

E-mail Address:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Identity / Passport Number of Parent/ Guardian:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Relationship to you:

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(Table G):

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SECTION E

CURRENT SCHOOL-LEAVING EXAMINATION DETAILS

Complete this section only if you are writing a school-leaving examination in 2010 (see Directions for Applicants, page 7, Section E).

School Name:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Table C.1)

(Table C.2)

School Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Examining Authority:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

School Address:

Postal Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

SCHOOL SUBJECTS TO BE WRITTEN THIS YEAR

SUBJECT

CODE
(Table C.3)

LEVEL
(Table C.4)

SECTION F

PAST SCHOOL-LEAVING DETAILS

PLEASE ENCLOSE CERTIFIED COPIES OF YOUR CERTIFICATES (See Directions for Applicants, page 8).

(Table C.1)

Last school attended:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

School Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

School Address:

Postal Code:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date written:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Examining Authority:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

(Table C.2)

SECTION G

DETAILS OF ACTIVITIES SINCE LEAVING SCHOOL OTHER THAN TERTIARY EDUCATION

If you have left school and are not at a tertiary institution, you must complete this section. (See Directions for Applicants, page 8, Section G).

Year	Activity	Code (Table D)	Year	Activity	Code (Table D)
Y Y Y Y			Y Y Y Y		
Y Y Y Y			Y Y Y Y		

SECTION H

TERTIARY EDUCATION DETAILS

If you have attempted any tertiary education you must complete this section.

Please enclose original transcripts or certified copies of your certificates/result statements (see Directions for Applicants, page 8, Section H)

Tertiary Institution	Code (Table E)	Year	Degree/Diploma for which registered	For Office Use Transcript Received
		Y Y Y Y		Y N
		Y Y Y Y		Y N
		Y Y Y Y		Y N
		Y Y Y Y		Y N

SECTION I

HOUSING APPLICATION

NOT TO BE COMPLETED BY MBA/AIM STUDENTS.

Please tick the appropriate box to apply for UCT accommodation, if you are eligible. (see Directions for Applicants)

I apply for student housing with catering provided: ☐

I apply for self-catering housing: ☐

NB - There is NO guarantee of accommodation.

SECTION J

UNDERGRADUATE FUNDING APPLICATION (see Directions for Applicants, page 9)

For undergraduates or LLB, and one-year postgraduate diploma study.

Applying for financial aid does not prejudice your application for study.

Please tick the YES box to apply.

I apply for UCT funding based on financial need.

If YES, complete FORM 9.

YES

☐

I do not wish to apply for funding from UCT.

NO

☐

- No application for funding can be considered unless the following details are completed in full.
- Do not submit any financial documents at this stage.

- Each member under FAMILY MEMBERS below should be indicated once only.

	APPLICANT	APPLICANT'S SPOUSE	APPLICANT'S MOTHER	APPLICANT'S FATHER	APPLICANT'S GUARDIAN/S	OTHER HOUSEHOLD MEMBER/S
HOW MANY FAMILY MEMBERS ARE:						
Dependants at Pre-Primary Level						
Dependants at School						
Dependants at Tertiary Institution						
Adults in your family						
FAMILY INCOME: (State yearly earnings before tax and other deductions)						
Full-time Employment	R	R	R	R	R	R
Part-time Employment	R	R	R	R	R	R
State Allowances Received	R	R	R	R	R	R
Maintenance Received	R	R	R	R	R	R
Pension Received	R	R	R	R	R	R
Other Income (not investments)	R	R	R	R	R	R
Monies Received (not above)	R	R	R	R	R	R

SECTION K

POSTGRADUATE FUNDING APPLICATION

Please tick the YES box to apply:

- for UCT funding based on financial need/ or merit

YES

☐

I do not wish to apply for funding from UCT.

NO

☐

If you have ticked YES, and you are a South African citizen or permanent resident, complete Form 10a.

Note: International applicants and refugees must apply direct to the Postgraduate Funding Office.

SECTION L

DECLARATION & UNDERTAKINGS BY APPLICANT

1. I have read and understood the Directions for Applicants. The information I have supplied is complete and true. If any of it is found to be incomplete, false or misleading the university may cancel any offer made, or my registration.
2. If I am a minor, my admission to the University has the consent of my parent/guardian.
3. I undertake to abide by the rules of the University.
4. I hold myself responsible for the payment of all fees and other charges due and payable by me to the University for all courses for which I register. If I am in arrears, I will be liable to pay interest at the rate of 1.25% per month from due date until date of payment and I will be liable for all costs of recovery, including fees charged by attorneys on the scale as between attorney and client and collection commission. I understand that payments received will be allocated to clear unpaid interest first, followed by the oldest debt. If I inform the Registrar in writing by the date prescribed in the rules of the University that I do not propose to return for the second term, I will not have to pay the second term's fees. I understand that if I am a non-South African student who qualifies for local fees, the minimum initial payment of academic and residence fees must be made prior to registration.
5. I accept, agree and understand that: UCT keeps and processes data and documents in electronic format, including the data supplied by me in this application form; UCT may use and transfer such data and use such documents in electronic or other formats for UCT purposes including submission of data for the National learner record database as required by the Department of Higher Education; that records of qualifiers and academic records are placed in the public domain; and that electronically generated documents may be used in place of the originals signed by me.
6. I hereby waive all claims against the University for any damages or loss suffered while I am, or as a consequence of my being, a student of the University, for damage to any property belonging to me or any other person, howsoever such damage or loss is caused, including but not limited through the negligence of the University or any official, employee or representative of the University.
7. I or my estate hereby indemnifies the University against any claims by any person arising in any way as stated above or in respect of my own negligent or willful acts or omissions.

If you are under 18, your parent/legal guardian must sign in the space provided. If you are 18 or older and your parent/legal guardian will be paying your fees, your parent/legal guardian must sign in the space provided.

Signature of Applicant: _____

Date:

D

D

M

M

Y

Y

Y

Y

DECLARATION BY PARENT OR LEGAL GUARDIAN

DETAILS OF PARENT / GUARDIAN (IF UNDER 18) (PLEASE PRINT)

Prefix (Table G.1):

Last Name:

First Names:

--	--	--	--

[illegible][illegible]

Postal Address:

[illegible]

Country Code:

--	--	--	--	--

Dialling Code:

--	--	--	--	--

Telephone Number:

--	--	--	--	--	--	--

Identity / Passport Number of Parent/ Guardian:

[illegible]

I agree and consent to the above declaration, undertakings, waiver and indemnity by the applicant. I consent to the applicant signing the registration forms if admitted. I hold myself jointly and severally liable with the applicant as co-debtor for all amounts due by the applicant to the University, until I notify the University in writing to the contrary, in which event such notification shall take effect only from the beginning of the following academic year.

Signature of Parent / Legal Guardian: _____

Date:

D

D

M

M

Y

Y

Y

Y

* Note: An applicant under the age of 18 must have this form signed by either of his/her parents. Where an applicant has no parents (e.g. they are deceased) or the parents are divorced, a legal guardian is normally officially appointed. In such cases the legal guardian must sign this form. If you do not have a parent or legal guardian, a responsible adult family member (next-of-kin) or other responsible adult who is prepared to make the declaration and the undertaking, must sign with you. The details of this person must be listed under the parent/guardian section on this form. (Section D)

APPLICATION FEE

PLEASE ENCLOSE CHEQUE, POSTAL ORDER OR BANK DRAFT Enter the amount enclosed below:

R

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(MBA/AIM applications must be sent direct to the GSB)

FOR
OFFICE USE

RECEIPT NUMBER:

Date:

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Amount Received: R | | | . |

Amount Outstanding: R

CHECKLIST

Please note: Even if you have not yet obtained some of the certificates mentioned above, please submit this application form now.
Send the certificates when you receive them, quoting your academic programme choice(s) and applicant number.

- Have you completed pages 1, 2, 3 and 4 of this form? _____
- Have you signed this form? _____
- If you are under 18, has your parent/legal guardian signed this form? _____
- Have you enclosed the application fee? _____
- Have you filled in your correct birth date? _____
- If you are an undergraduate applicant and have completed your schooling, have you enclosed certified copies of your certificate? _____
- If you have attended a higher education institution, have you enclosed an original transcript and certificate of conduct? _____
- If you are an applicant to Health Sciences or Humanities, have you made arrangements to write the respective Placement or Alternative Admissions Tests? _____