



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. Information pages to be retained by the student.

SECTION A: INSTRUCTIONS

PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THE APPLICATION FORM

1. General

- 1.1 This form must be completed by all students applying to Juta Adult Learning for the first time.
- 1.2 It is in your own interest to ensure that this form is completed in full and that certified copies of all supporting documents are enclosed. 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 black ink and use block letters.

2. Admission requirements

Communication in English at NQF 4 or higher
Mathematical Literacy at NQF4
Computer Literacy
Matric Certificate or Equivalent

- 2.1 Juta Adult Learning offers the opportunity for qualifying individuals to apply for Recognition of Prior Learning (RPL) on the criteria list below:
 - a) If you are 25 years old or older.
 - b) You have sufficient work experience of at least 5 years.
- 2.2 All candidates who comply with the minimum requirements are still subject to selection procedures.

3. When registering with Juta Adult Learning you are required to submit the following certified documents:

- 3.1 A certified copy of the first page of your Identity Document
- 3.2 A certified copy of your last School Certificate or equivalent qualification. If name on certificate differs from the name on the application form please supply proof of name change.

In International students must also meet the requirements set out in paragraph 4 below.

4. International Students (non South African citizens)

4.1 Certified copies of the following documents must accompany this form:

Your passport/refugee permit/proof of permanent residence
Your school leaving certificate should be submitted with the English translation of the certificate.

Your qualification should be evaluated by the South African Qualifications Authority (SAQA). SAQA can be contacted at: Postnet Suite 248, Private Bag X06, Waterkloof 0145, South Africa. Tel +27 +12 431 5000. Website address: <http://www.saga.org.za> . Attach the report Students with qualifications from the West African Examination Council (WAEC) and the National Examinations Council (NECO) should submit a scratch card. Applicants from Angola, the Democratic Republic of Congo or Cameroon should submit a sixth year Bulletin:

Diplom D'Etat, Journal and transcripts of results, or Journal or Confirmation of Results from the Embassy. NB: Closing date: 31 August. No late applications will be accepted.

CHECKLIST

Please note that the Juta Adult Learning 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.

		YES	NO
1	Attached a certified copy of Identity Document OR birth certificate		
2	Attached certified copy of your highest qualification or Affidavit		

APPLICATION FOR ADMISSION FOR THE YEAR

2	0		
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Please read GUIDE TO THE COMPLETION OF THE APPLICATION FORM, the insert in the middle of this form, carefully before completing this application form.

TITLE (e.g. Mr, Mrs)																					INITIALS									
SURNAME																														
First names																														
MARITAL STATUS	SINGLE		MARRIED		DIVORCED		WIDOWED		OTHER																					
MAIDEN NAME																														

NB: Applications will not be processed without a copy of the applicant's ID or birth certificate and the number in full entered below.

IDENTITY NUMBER																														
PASSPORT NUMBER																														
DATE OF BIRTH	D	D	M	M	Y	Y	Y	Y																						

NB: The following question allows the institution and the Government to track the progress of transformation in Higher Education.

ETHNIC GROUP	AFRICAN		COLOURED		INDIAN		WHITE		
HOME LANGUAGE									

PROPOSED QUALIFICATION: NQF5: DIAGNOSTIC PROCEDURAL CODING

For office use only

Choice 1	Accepted	Provisionally accepted	Not accepted	Waiting list	Signature Print: Initials & surname	Date
Choice 2	Accepted	Provisionally accepted	Not accepted	Waiting list	Signature Print: Initials & surname	Date
Reason for rejection (compulsory)						
Comment						
Receipt number	Date	Amount		Cashier		

ARE YOU AT PRESENT			
UNIVERSITY STUDENT		GRADE 12 STUDENT	
UNIVERSITY OF TECHNOLOGY STUDENT		OTHER (e.g. housewife, travelling, unemployed) Specify below	
FET COLLEGE STUDENT			

CONTACT DETAILS

ADDRESS (where you live permanently or where you can be contacted)													
											POSTAL CODE		

Telephone (home)																				
Telephone (Work)																				
Cell phone																				
Email address																				

ACCOUNT ADDRESS (Name and address of person responsible for payment of fees)	SURNAME																			
	Title and initials																			
	Address																			
										POSTAL CODE										

Telephone (home)																				
Telephone (Work)																				
Cell phone																				
Email address																				

CONTACT DETAILS OF PARENT/LEGAL GUARDIAN/FRIEND/RELATIVE												RELATIONSHIP (e.g. father)								
TITLE (e.g. Mr, Mrs)							INITIAL				SURNAME									
POSTAL ADDRESS (where abovementioned person lives permanently or can be contacted)																				
														POSTAL CODE						

Telephone (home)																				
Telephone (Work)																				
Cell phone																				
Email address																				

NON SOUTH AFRICAN CITIZENS

PLEASE SPECIFY YOUR COUNTRY OF ORIGIN																				
CITIZENSHIP																				

IF NOT A SOUTH AFRICAN CITIZEN, PLEASE TICK ONE OF THE OPTIONS BELOW:

(A) AFRICAN (African countries)	<input type="checkbox"/>	(E) EXCHANGE STUDENT	<input type="checkbox"/>
(F) FOREIGN (outside Africa)	<input type="checkbox"/>	(N) PERMANENT RESIDENT	<input type="checkbox"/>
(R) REFUGEE (Refugee permit)	<input type="checkbox"/>		<input type="checkbox"/>

Please note that international applicants will be required to be in possession of a Study Permit in order to register.

HIGH SCHOOL OR EQUIVALENT INFORMATION

LAST GRADE PASSED

DATE OF LAST PASSED GRADE

DISABILITY STATUS

This information will not disadvantage your application.						
Do you have any disabilities/special needs					Yes	No
If yes, please indicate by ticking the relevant blocks:						
NONE	000		MULTIPLE	007		
SIGHT	001		DISABLED BUT UNSPECIFIED	009		
HEARING (WITH HEARING AID)	002		ASTHMA	010		
COMMUNICATION (TALK, LISTEN)	003		EXTRA TIME CONCESSION	1005		
PHYSICAL (MOVE, STAND, GRASP)	004		UNKNOWN DISABILITY	U		
INTELLECTUAL (LEARNING DIFFICULTY)	005					
EMOTIONAL (BEHAVIOUR, PSYCHO)	006					

LEGAL UNDERTAKING (COMPULSORY)

I, ID/Passport number.....
declare that all the particulars supplied by me in this form are true, complete and correct. I accept that incorrect or misleading information could lead to the cancellation of this application.

1. I undertake:

- 1.1 to comply with all the rules and regulations, including the disciplinary rules, of Juta and Company: Adult Learning, including any amendments thereof as published from time to time and to acquaint myself with all the provisions thereof;
- 1.2 to notify the Faculty Office immediately if I abandon my qualification of studies and/or change my address; to acquaint myself with and adhere to all the rules and general regulations applicable to the qualification for which I wish to enrol as well as the rules regarding the payment of fees;

I undertake that I will not hold Juta and Company: Adult Learning liable nor make any claim against Juta and Company: Adult Learning for any compensation and/or any expenses incurred or damages suffered as a result of or in respect of any injury to me or illness or my death, irrespective of whether any such damages, injury or death may have been attributable to any degree of negligence on the part of Juta and Company: Adult Learning or one or more of its employees or other person (s) for whose actions it might, but for this undertaking, have been responsible. I am aware that my enrolment is valid only if it complies with the regulations governing the qualification concerned, notwithstanding the acceptance of this enrolment by Juta and Company: Adult Learning.

I accept that, if I abandon or change my qualification of study at any time, no cancellation or reduction of fees will be considered and that I will remain liable for the payment of all fees in full. I agree that Juta and Company: Adult Learning may provide me with statements of account and any other communiqués by way of electronic communication through data messages. These data messages may be sent to the cellular number provided by me. I am also prepared to accept such messages at my Juta and Company: Adult Learning student email address or at an alternative email address nominated by myself in writing.

SIGNED AT ON THISDAY OF 2013.

SIGNATURE OF APPLICANT

Herein assisted as far as may be necessary while the applicant/student is still under the age of eighteen years I,ID/Passport Number the undersigned, hereby acknowledge myself to be jointly and separately responsible for monies which the abovementioned applicant may at any stage be owing to Juta and Company: Adult Learning in terms of the agreement that he/she concluded with Juta and Company: Adult Learning, as set out above, including any change thereto.

SIGNED AT ON THISDAY OF 2013.

.....
SIGNATURE OF PARENT/LEGAL GUARDIAN

ADVISED BY (OFFICE USE ONLY).....

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

WHERE TO SEND YOUR APPLICATION

Address your application to the Juta and Company - Adult Learning as indicated:

- 1. Email: alearning@juta.co.za
- 2. Fax: +27 21 659 2360
- 3. Hand it in to the official on duty at the registration sessions.
- 4. Post to:
 Juta Adult Learning
 P.O. Box 14373
 Lansdowne
 7779
 Cape Town
 Tel: +27 21 659 2300

OR Hand it in to the official on duty at the registration sessions.