

Juta and Company

Application form: Diagnostic and Procedural Coding

Name					
Surname					
ID number					
Title	Miss	Ms	Mrs.	Mr.	Dr
Marital status	Single		Married	Divorced	
Gender	Female		Male		
Home language					
Postal address		Residential address			
Telephone numbers	H		W	C	
Email address					
Tick the relevant block to indicate which course you will be applying for:					
Course	Credits	Level	Fees incl. VAT	Tick	
HC: Procedural and Diagnostic Coding	123	5	R 18 924		
Anatomy, Physiology and Microbiology	32	5	R 7 410		
Procedural and Diagnostic coding	65	5	R 6 270		
Health Information and Health Insurance	26	5	R 5 244		
For payment arrangements please email training@juta.co.za or call 021 659 2300					
Highest qualification					
The following must be submitted with your application ✓					
Certified copy of a South African Identity document					
Certified copy of your highest qualification					
Original official translations of all document(s) if they are not in English or Afrikaans					
Payment method	Cash	Bursary form Employer		Eduloan	

I declare that all the particulars provided by me on this form are true and correct. I undertake to comply with all the rules, regulations and decisions of JUTA and Company and any amendments thereto and I have taken note of the general information applicable to students especially with regards to the selection of learning subjects.

Surname: _____ **Initials:** _____

Applicant's signature: _____ **Date:** _____