

APPLICATION FORM



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www.bolandcollege.com
Private Bag X5068, Stellenbosch, 7599

BOLAND COLLEGE CAMPUSES: MARK WITH AN "X"									
CALEDON	PAARL	STRAND	STELLENBOSCH	WORCESTER	KLEINMOND	BREDASDORP	HERMANUS		

CENTRAL OFFICE: Private Bag X5068, Stellenbosch, 7599

ACADEMIC PERIOD						
YEAR	SEM 1	SEM 2	TRI 1	TRI 2	TRI 3	

PLEASE READ THE GENERAL INFORMATION AND INSTRUCTIONS SECTION BELOW BEFORE COMPLETING THIS FORM.

WERE YOU PREVIOUSLY REGISTERED AS A STUDENT AT BOLAND COLLEGE?	YES	NO
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STUDENT NUMBER	SURNAME	INITIALS

PLEASE INDICATE THE PROGRAMME FOR WHICH YOU ARE APPLYING	NC(V)	N4 - N6	N1 - N3	OTHER
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STUDY FIELD: I.E. PRE-MATRIC, BUSINESS, UTILITIES, ENGINEERING, OTHER	
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FULL-TIME	PART-TIME	SHORT/SKILL PROGRAMME	LEARNERSHIP
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GENERAL INFORMATION

PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THIS FORM.

A. GENERAL

1. This form must be completed by all students applying to Boland College for the first time.
2. The application form must be signed by the applicant and the legal guardian (if applicant is younger than 18 years) and not financially equipped to pay for his/her own studies.
3. It is in your own interest to ensure that this form is completed in full and that copies of all supporting documentation are enclosed. If any questions are left unanswered or documents are not enclosed, or the legal undertaking is not signed by the student and/or the legal guardian, it will cause a delay as the form will be returned for completion.
4. Please write in black ink and use block letters.
5. The closing date for applications will be determined by the College at the start of the respective academic period or when the programme is full, whichever occurs first.

B. DOCUMENTS

1. A certified copy of the first page of your Identity Document must accompany this application.
2. A certified copy of your Senior Certificate or highest qualification must be submitted with your application.
3. NB: Grade 12 learners must attach a copy of their Grade 11 final results and June or September Grade 12 results. The report must indicate the subjects and symbols obtained. If you attended any other higher education institution, an original academic record or certified copies of other certification obtained previously, must also be submitted.
4. Proof of residential address of parents/guardian or municipal account.

C. INTERNATIONAL STUDENTS (Non South African citizens)

1. A certified copy of your passport must accompany this form.
You are required to produce a valid study permit before you will be permitted to register.
2. Non-RSA qualifications: The onus rests with all international applicants to have their school qualifications evaluated by SAQA before submitting this application form. SAQA can be contacted on telephone number: **+27 86 010 3188**.

D. ADMISSION REQUIREMENTS

1. Please consult the faculty concerned or www.bolandcollege.com for full details of the admission requirements pertaining to the qualification/programme for which you intend to enrol.
2. All candidates who comply with the minimum requirements are still subject to selection procedures determined by the respective faculty. Only cheques, copies of bank deposit or a Boland College cash receipt are acceptable as proof of payment. An additional fee of R50 will be charged for any re-issue of Student Cards.

E. PAYMENT POLICY

The various payment options can be considered subject to a credit application and clearance. The minimum amount payable can be deposited at ABSA Bank. In the reference column of the bank deposit, please clearly indicate your student number or identity number (student) as reference. A financial agreement and debit order must be completed for the balance. The financial policy of Boland College does not allow for any deviations from the prescribed payments.

PROGRAMME	MINIMUM PAYABLE (CLASS FEES)	MINIMUM PAYABLE (RESIDENCE FEE)	BALANCE PAYABLE
YEAR	25%	25%	10 MONTHS
SEMESTER	50%	50%	4 MONTHS
TRIMESTER	50%	50%	2 MONTHS

RESIDENCES:

Refundable deposit R1000

Payable in advance R2000

ABSA	TYPE OF ACCOUNT	BRANCH CODE	ACCOUNT NUMBER	FAX PROOF OF PAYMENT TO
CALEDON	CALL ACCOUNT	334410	9112827082	028 212 3271
PAARL	CALL ACCOUNT	334410	9072527354	021 872 5944
STELLENBOSCH	CALL ACCOUNT	334410	4084323301	021 887 0774
STRAND	CALL ACCOUNT	334410	9116254166	021 854 8756
WORCESTER	CALL ACCOUNT	334410	9112827359	023 342 5768

F. COPIES OF DOCUMENTS TO BE ATTACHED: MARK WITH AN "X"

IDENTIFICATION DOCUMENTS	
SA IDENTITY DOCUMENT	PROOF OF APPLICATION FOR NEW SA ID
PASSPORT (FOREIGN APPLICANT)	REFUGEE TRAVEL DOCUMENT

ACADEMIC DOCUMENTS	
NATIONAL SENIOR CERTIFICATE	MATRICULATION EXEMPTION CERTIFICATE
FINAL GRADE 11 AND/OR MID-GRADE 12 RESULTS	OTHER DIPLOMAS
ORIGINAL SAQA EVALUATION (FOREIGN APPLICANT)	PREVIOUS NATIONAL DIPLOMA
N3/N4/N5/N6 RESULTS (WHERE APPLICABLE)	ACADEMIC RECORD FROM HIGH SCHOOL
MATRICULATION RESULTS STATEMENT	CERTIFICATE OF CONDUCT (ORIGINAL)

CONTRACT	PROOF OF ADDRESS
SIGNED BY APPLICANT	MUNICIPAL BILLING DOCUMENT
SIGNED BY LEGAL GUARDIAN	OTHER ACCOUNT STATEMENT

G. CHANGE OF ADDRESS AND CONTACT DETAIL

The College must be notified immediately of any change of address (postal or physical) after submission of the form.

H. LANGUAGE POLICY

In accordance with the Council Approved Language Policy, Boland College is a bilingual institution where Afrikaans and English are spoken and where lectures are presented in Afrikaans and English. All the Boland College campuses are NOT parallel medium campuses and the language medium for lectures is determined by the lecturer in consultation with his/her class group. In all cases key terms and concepts are also provided in the alternative language and the rights of students to discussion, study material, tests and examinations in the lecturing language of their preference is recognised and supported.

I. ACKNOWLEDGEMENT OF APPLICATION

Should receipt of your application form not be acknowledged within four weeks of posting/submission, enquiries must be made to the relevant faculty of the campus to which your application was submitted.

J. CANCELLATION OF APPLICATION

The College must be notified immediately if this application is cancelled or changed prior to registration.

K. APPLICATION FOR ACCOMMODATION IN RESIDENCE

Residences are situated only on the Stellenbosch, Paarl, Worcester and Caledon Campuses, but are available to all bona fida full-time students. A residence admission fee (R2000) is payable on acceptance into the residence. Applications for Residence Accommodation: Please refer to **Section I on page 10** of this form.

L. SEPARATE LETTERS

Kindly note that the outcome of your academic application, residence application and bursary application will be made available in separate letters.

SECTION B: FORMAL STATISTICAL INFORMATION

SOCIO-ECONOMIC CATEGORY	
STATE PROFESSION OF PARENT/CAREGIVER	

CITIZENSHIP			
100 - RSA	101 - NAMIBIA	IF OTHER STATE CITIZENSHIP	

ETHNIC GROUP*				
ASIAN	BLACK	COLOURED	INDIAN	WHITE

*Please note that this question is asked to allow the institution and the Government to track progress in the transformation of Higher Education.

IF YOU ARE NOT A SOUTH AFRICAN CITIZEN, PLEASE TICK ONE OF THE OPTIONS BELOW	
<input type="checkbox"/>	INTERNATIONAL APPLICANT WITH PERMANENT RESIDENCE
<input type="checkbox"/>	INTERNATIONAL APPLICANT WITH TEMPORARY RESIDENCE

Please note that international applicants will be required to produce either a permanent residence permit or a study permit in order to register. It is your responsibility to apply for the necessary permit in good time. If you already have a valid permit, please provide the details below.

TYPE OF PERMIT	NORMAL	FOREIGN	PERMIT EXPIRY DATE	D	D	M	M	Y	Y	Y	Y

SOURCE OF FUNDING	NORMAL	OTHER GOVERNMENT

SECTION C: GENERAL INFORMATION

BURSARY REQUIRED	YES	NO

Subject to a separate application (forms available on request)

NAME OF EMPLOYER RESPONSIBLE FOR PAYMENT

WHERE DID YOU HEAR ABOUT BOLAND COLLEGE? PLEASE MARK WITH AN "X" IN ALL RELEVANT OPTIONS.

<input type="checkbox"/>	FRIENDS	<input type="checkbox"/>	TEACHERS	<input type="checkbox"/>	FAMILY	<input type="checkbox"/>	TALK AT YOUR SCHOOL
<input type="checkbox"/>	OUR WEBSITE	<input type="checkbox"/>	PROMOTIONAL ITEMS	<input type="checkbox"/>	RADIO	<input type="checkbox"/>	COMMUNITY NEWSPAPERS
<input type="checkbox"/>	OTHER NEWSPAPERS	<input type="checkbox"/> PLEASE SPECIFY WHICH NEWSPAPER(S)					

HAVE YOU STUDIED ELSEWHERE?	YES	NO

SECTION D: EMPLOYMENT DETAILS

NAME OF EMPLOYER	ACCOUNT TO EMPLOYER	YES	NO

ADDITIONAL COMMENTS

SECTION E: SECONDARY EDUCATION

ACTIVITY LAST YEAR	
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PLEASE PROVIDE DETAILS OF YOUR RECENT ENROLMENT, IF LOWER THAN GRADE 12.

YEAR OF FIRST REGISTRATION					YEAR OF LAST REGISTRATION				
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NAME OF INSTITUTION ATTENDED	
HIGHEST GRADE COMPLETED	

SCHOOL EXAMINATION RESULTS IF YOU COMPLETED MATRICULATION EARLY IN A NON-SCHOOL ENVIRONMENT

Please send us copies of all available examination results. If you have not yet written these examinations, enter subjects and grade/levels to be written. Add any subjects that are not on our list.

NATIONAL SENIOR CERTIFICATE		YEAR OF EXAM	
OTHER e.g. N3, HIGSE, GCE, ICB		YEAR OF EXAM	

SECTION F: CONTACT DETAILS

POSTAL ADDRESS PRIMARY CONTACT OF STUDENT (Where you live permanently or where you can be contacted) (CSN-PA)			
TELEPHONE CODE & NUMBER		POSTAL CODE	

BUSINESS POSTAL ADDRESS OF STUDENT (Where you live permanently or where you can be contacted) (CSN-PO)			
TELEPHONE CODE & NUMBER		POSTAL CODE	

STUDY ADDRESS OF STUDENT (Where you reside while studying) (CSN-S)			
TELEPHONE CODE & NUMBER		POSTAL CODE	

BILLING DOCUMENTATION PROVIDED (Proof of residence)	YES	NO
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TITLE	SURNAME	INITIALS

ACCOUNT ADDRESS (Person responsible for payment) (CSN-AA)			
TELEPHONE CODE & NUMBER		POSTAL CODE	

CONTACT DETAILS OF PARENT, GUARDIAN & NEXT OF KIN

TITLE	SURNAME	INITIALS	RELATIONSHIP (e.g. Father)

ADDRESS (PHYSICAL) (domicilium citandi et executandi) (CSN-PA)	
TELEPHONE CODE & NUMBER (H)	
TELEPHONE CODE & NUMBER (W)	
CELL PHONE NUMBER	
E-MAIL ADDRESS	
	POSTAL CODE

SECTION G: DISABILITIES

If you have a disability, but choose not to disclose it in this form, Boland College is under no obligation to assist or accommodate you with regard to that disability.

01 ADHD – ATTENTION DEFICIT DISORDER	02 AUTHISTIC SPECTRUM DISORDER
03 BEHAVIOURAL/CONDUCT DISORDER	04 BLINDNESS
05 CEREBRAL PALSIED	06 DEAFNESS
07 DEAF/BLINDNESS	08 EPILEPSY
09 HARD OF HEARING	10 MILD/MODERATE INTELLECTUAL DISABILITY
11 INTELLECTUAL DISABILITY	12 PARTIALLY SIGHTNESS/LOW VISION
13 PARTIAL DISABILITY	14 SEVERE INTELLECTUAL DISABILITY
15 SPECIFIC LEARNING DISABILITY	16 PSYCHIATRIC DISORDER
17 DYSLEXIA	24 QUADRIPLAGIC
25 AMPUTEE	MULTIPLE (SPECIFY)
OTHER (SPECIFY)	

SECTION H:

CHECKLIST

Did you fill in the name of the field of study you are applying for?
If you previously studied at another higher education institution, have you attached your academic record?
Did you state the level of your school subjects (e.g. English First Language, 50%)
Did you sign the form?
If you are under 18 years of age, did your parent/guardian sign the form as well?
Did you enclose the Registration and Admin fee for timeous applications?
If already matriculated, did you attach a copy of your National Senior Certificate/Evaluation?
Did you take note of the Language Policy?
Did you sign the indemnity form?
Certified copy of your ID/Passport attached?

MEMORANDUM OF AGREEMENT

Should my application be successful - I declare that:

1. All particulars given by me in this form are true and correct;
2. I will acquaint myself with the rules and regulations, including the disciplinary rules of Boland College and will abide by them;
3. I waive any claim against Boland College, resulting from any act or omission on my part during tuition, sport, tours, practicals or in Boland College Residence;
4. I accept responsibility for the care and safekeeping of all Boland College property (text books, notes, tools and equipment) issued to me for training.
Text books remain property of Boland College and must be returned in condition received;
5. I will inform the College immediately, in writing, should I change my address or cancel or change my course (programme) or any subjects;
6. I am aware that my enrolment is valid only if it complies with the relevant regulations of the College; notwithstanding provisional acceptance of this enrolment by the College; account will be handed over to debt collection agency;
7. I am aware that interest, fees and legal costs will be recovered from me should I fail to timeously fulfil my financial commitments towards the College (the account will be handed over to a debt collection agency);
8. I am capable of concluding an agreement and am legally competent to sign this application and may therefore enter unassisted into an agreement with the College; and
I sign this application and enter into an agreement with Boland College with the permission of my parents (a) / guardian (b) / husband (c); (Delete (a), (b) or (c), whichever is applicable).
9. I accept full responsibility and liability for the payment of the total of all class and residence fees as well as any other fees determined by Boland College at the date of enrolment; Refunds for any withdrawals after enrolment will only be considered in exceptional circumstances;
10. I fully understand and accept the College's policy with respect to refunds, as outlined on page 10 hereof;
11. I am aware that the College will levy an administrative fee as determined from time to time by the College, on all cheques dishonoured by my bank;
12. I will not claim compensation for photos taken, voices used, student participation in functions, etc. and accept that any photos used for publicity reasons will be the property of the College.
13. Exam admission: 40% year mark plus 80% attendance.

SIGNATURE OF APPLICANT _____ DATE _____

Herein assisted as far as may be necessary while the applicant or student is still under age of 21 years.

I, _____ THE UNDERSIGNED,

IN MY CAPACITY OF _____ (PRINT FIRST NAMES AND SURNAME OF STUDENT)

HEREBY ADMIT THAT I AM _____ (PARENT OR LEGAL GUARDIAN)

To be jointly and separately responsible for monies, which the above applicant may at any stage owe to Boland College in terms of the agreement that he/she concludes with the College.

SIGNATURE OF PARENT OR LEGAL GUARDIAN _____ DATE _____

** All property of Boland College must be respected. Should I be found guilty of miscellaneous damage to the College property I will be held responsible for the payment of damage caused.*

NB. IT IS COMPULSORY THAT THIS CONTRACT BE SIGNED BY ALL PARTIES CONCERNED.

**BOLAND COLLEGE PRACTICAL TRAINING EXCURSIONS:
INDEMNITY FORM CLAIMS FOR DAMAGES ENTERED BY STUDENTS AND/OR THEIR PARENTS AND/OR THEIR GUARDIANS**

I, _____ (FULL NAME)

the undersigned hereby declare that I shall not institute any claim of any nature whatsoever against Boland College or any employee of Boland College, who is acting within his or her employment capacity, nor shall I in any way whatsoever hold Boland College responsible for any loss or damage that I may suffer in person or in respect of any property of mine, or which may directly or indirectly arise from my commitment, as a registered student, towards Boland College, with regards to the journey to and from the practical training excursion and with regards to any activities at the excursion, regardless of the way in which such loss or damage may occur and regardless of who or what may be responsible. I undertake to participate in any activity that I am expected to participate in, on my own responsibility; voluntarily taking on any risk I expose myself to in connection with such activity.

I hereby confirm that I have acquainted myself with all the information and rules in connection with the practical training, and that I am, as a registered student of Boland College, bound to adhere to the General Rules and Regulations of Boland College.

I furthermore declare that, in case I am injured and cannot personally give consent to medical treatment or any other essential medical intervention, the supervisory staff may sign the necessary letters of consent on my behalf.

As far as I know, I do not suffer from any physical disability or illness that would make it inadvisable for me to attend the practical training. However, I do wish to bring the following to your attention:

I confirm that all the above information is correct.

THUS SIGNED AT _____ ON THIS _____ DAY OF _____ 20 _____

STUDENT _____ PARENT/GUARDIAN _____

SECTION I:

REFUNDING OF CLASS/RESIDENCE FEES

1. Refund and/or Exemption of fees can be considered in the following instances:

- 1.1 Upon the death of a student or continuous illness endorsed by a medical certificate.
- 1.2 Transfer to another educational institution not caused by the student (e.g. transfer of parents).
- 1.3 If the College is unable to present the programme or subject that the student has enrolled for.
- 1.4 If the student has not attended any classes. The reason has to be given in writing and a decision will be taken on a merit basis.

2. Refund/Cancellation Credits will be granted as follows:

- 2.1 No classes attended
 - (a) Refund less R200 administration fee will be retained by the College, except in the case of number 1.3 above, where all fees paid in advance will be refunded.
 - (b) Class fees refund only applicable to non-bursary students.
- 2.2 Classes attended
 - (a) Refund less R200 administration fee.
 - (b) Class/Subject and Practical fees: Refund/Cancellation credits will be calculated at the time of withdrawal and will vary per academic period.

3. Refund/Cancellation Credits and/or Exemption of fees for reasons other than number 1 above:

Will only be considered under exceptional circumstances and the value thereof will be calculated on approval by the College.

4. Formula for the refunding of residence fees:

- (a) Any residence deposit (minus a R200 administration fee) may be refunded up to the 22nd of September of the year if a valid reason is given in writing. Thereafter there will be no refunding of any deposit except in the case of 1.3.
- (b) Students who have booked accommodation, but will not be attending College for a full year, must give the College written notice by no later than 1 April in that year, of any intention to return to the Residence, to qualify for a refund on the annual fee.

PLEASE NOTE:

Written requests from parents or the person responsible for the payment of student fees, are needed before a refund of fees is considered.