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|  **APPLICATION FORM**  **2023****NEW STUDENTS ONLY**  |

**Please complete the entire form in print and black ink.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| National Certificate Vocational (NCV)  |   | Report 191 Business Studies |   | Report 191 Engineering Studies  |   | PLP |  |

**At which campus would you like to study?**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Maluti Campus** |  | **Mt Fletcher Campus** |  | **Mt Frere Campus** |  | **Ngqungqushe Campus** |  | **Siteto Campus** |  |

**Capture student number below**

|  |  |  |  |  |  |  |  |  |
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|   |   |   |   |   |   |   |   |   |

|  |  |  |
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| **National Certificate Vocational (NCV)**  |              | **REPORT 191**  |
| **Level 2**  |  | **Level 3**  |  | **Level 4**  |   | **N1**  |  | **N2**  |  | **N3**  |  | **N4**  |  | **N5**  |  | **N6**  |   |
| Civil Engineering & Building Construction  |   | Business Management  |   |
| Electrical Infrastructure Construction  |   | Civil Engineering  |   |
| Engineering & Related Design  |   | Electrical Engineering  |   |
| Finance, Economics & Accounting  |   | Financial Management  |   |
| Generic Management  |   | Human Resources Management  |   |
| Information Technology & Computer Science  |   | Legal Secretary  |   |
| Marketing  |   | Management Assistant  |   |
| Office Administration  |   | Marketing Management  |   |
|   | Mechanical Engineering  |   |
| Public Management  |   |
|  |  | Farming Management |  |

|  |  |  |
| --- | --- | --- |
| **PROGRAMME: PRE-VOCATIONAL LEARNING**  |  |  |
| Foundational English |  |  |
| Foundational Maths |  |  |
| Foundational Science |  |  |
| Foundational Life Skills and Technology |  |  |
| Have you been enrolled in a PLP before | YES | NO |

# SECTION A: PERSONAL DETAILS

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ID Number  |   |   |   |   |   |   |   |   |   |   |   |   |   |   | Date of birth  |   |   |   |   |   |   |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title | Mr |  |  | Ms |  |  | Other |  |  | Specify |  |  | Initials |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname  |   |   | Maiden Name, if applicable  |   |

|  |  |
| --- | --- |
| Full Names  |   |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Home Tel  |   |   |   |    |   |   |   |   |   |   |   |
| Cell  |   |   |   |   |   |   |   |   |   |   |

|  |  |
| --- | --- |
| Email address  |   |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Bursary assistance required  |   | Yes  |   |   | No  |   |

# SECTION B: BIOLOGICAL INFORMATION

|  |  |
| --- | --- |
| Nationality  |   |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Home Language  |   | IsiXhosa  |   |   | English  |   |   | IsiZulu  |   |   | Afrikaans  |   |   | Other ( specify)  |   |

|  |  |
| --- | --- |
| Preferred Language  |   |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Gender  |   | Male  |   |   | Female  |   |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Ethnic Group  |   | Black African  |   |   | White  |   |   | Coloured  |   |   | Indian  |   |   | Other (specify)  |   |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Marital Status  |   | Single  |   |   | Married  |   |   | Divorced  |   |   | Widowed  |   |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |  |
| --- | --- |
| Citizenship  |  |
| South African  |   |

 |

|  |  |
| --- | --- |
| Permanent resident  |   |

 |

**If you are not a South African citizen please indicate**

Study permit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry date

|  |
| --- |
| **SECTION C: EMPLOYMENT DETAILS (IF APPLICABLE)** |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Name of Employer/ Business

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

Account to Employer

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Postal Code |  |  |  |  |

Employer’s/

Business Address

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | Postal Code |  |  |  |  |

Employer’s/

Business Postal Address

ADDITIONAL COMMENTS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  Work Telephone Number  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Occupation

|  |
| --- |
| **SECTION D: SCHOOL LEAVING DETAILS** |

|  |  |  |  |
| --- | --- | --- | --- |
| Last School attended |  | Examination Date |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Matric Date |  |  | Grade 9 |  | Grade 10 |  | Grade 11 |  | Grade 12 |  |

***NB: Please attach a copy of your academic results or school report and I.D. Copy***

***Please tick***

|  |  |  |  |
| --- | --- | --- | --- |
| Previous Year Activity |  |  |  |
| At this College |  | Other College |  |
| University |  | Technical College |  |
| Technikon |  | Higher Education |  |
| Unemployed |  | Secondary School |  |
| Foreign Education |  | Working |  |

|  |
| --- |
| **SECTION E: STUDENT ADDRESS** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Physical Address |  |  |  | Postal Address |  |
|  |  |
|  |  |  |  |
| Postal Code |  | Postal Code |  |

# SECTION F: DISABILITIES/SPECIAL NEEDS

Please tick where applicable.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Blindness or Special Sighted |   |   | Low Vision  |   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Deafness  |   |   | Hearing (Even with hearing aid) |   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Epilepsy  |   |   | Intellectually disabled  |   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Psychiatric disorder  |   |   | Physically challenged  |   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Cerebral Palsy  |   |   | Other Specify  |   |

|  |  |
| --- | --- |
| Allergies/ Health Problems  |   |
| Contact Person  |   |   | Contact No  |   |
| Dr Name  |   | Dr Tel  |   |

# SECTION G: INFORMATION OF PERSON(S) RESPONSIBLE FOR PAYMENT OF ACCOUNT (PARENT/GUARDIAN/EMPLOYER/INSTIUTION)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Parent/ Guardian  |   |   | Relationship  |   |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Physical Address  |   |      | Postal Address  |   |
|   |   |
|  |   |  |   |
| Postal Code  |   | Postal Code  |   |

|  |  |
| --- | --- |
| Occupation  |   |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Work Tel  |   |   |   |   |   |   |   |   |   |   |
| Home Tel  |   |   |   |   |   |   |   |   |   |   |
| Cell  |   |   |   |   |   |   |   |   |   |   |

Please attach a certified ID copy of parent or guardian

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Accommodation needed  |   | Yes  |   |   | No  |   |

If yes, please request hostel application form

# SECTION H: TERMS AND CONDITIONS

* A student may not damage or interfere with the property of the College and others including students, staff and members of the public on the College premises;
* In that case the student will be held liable for any damage
* A student is responsible for the care and safe keeping of all the resources
* Equipment’s that are issued to students should be returned back to the College including textbooks etc.
* No firearms, traditional weapons of any kind of dangerous weapons allowed on the College premises.
* A student’s general behaviour should at all times not discredit the College reputation.
* The College has a right to do a random searching at any time, without warning; order a search for illegal substances by the staff, security, police or a relevant section at the South African Police Services.
* A student has to inform the Campus Management/ registration unit in writing of any change in residential or postal addresses.
* Students will obey all reasonable instructions given to him/her by any member of the academic or administrative staff of the College.
* All cellular phones must be switched off during lecturing hours.
* The College is not responsible for stolen goods.
* Smoking is prohibited inside and at the premises of the College buildings, it is only allowed to designated areas.
* Right of Admission to the College is reserved.

# SECTION I: DECLARATIONS

 I HEREBY DECLARE:

* That the particulars furnished by me above in this application form are true and correct;
* That I undertake as a registered student of the College to abide by all the rules and regulations of the INGWE

 TVET College, including any amendments thereto and any substitutions

* thereof; that I undertake to pay all class and other fees punctually;
* That 80% class attendance in all subjects is required at INGWE TVET College for admission to exams and a term mark of 40% for Report 191 subject & for NCV subjects as per DoE Policies;
* That I undertake to let the College know of any changes to the information above, within 14 days after

registration; That it is my responsibility to confirm exam dates;

* That it is my responsibility to make enquiries about my results (when it is available).

 **Signature --------------------------------------- Date-------------------------------------------**

  **Student**

 **Signature---------------------------------------- Date--------------------------------------------**

  **Parent/Guardian**

|  |
| --- |
| **SECTION J: CHECKLIST(OFFICE USE ONLY)**  |
| **LECTURER USE ONLY**  |  |

Please write the student subject to be enrolled for:

|  |  |  |
| --- | --- | --- |
| **NCV**  |         | **COLLEGE ACCOUNT DETAILS** Account Name: Ingwe TVET CollegeBank Name: Standard BankAccount Number: 082097097Reference: Student Number/ ID Number |
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| **PROGRAMME: PRE-VOCATIONAL LEARNING**  |
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| **REPORT 191**  |
|   |
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|  |  |  |
| --- | --- | --- |
|   | Signature  | Date  |
| Form Checked  |   |   |
| Student accepted  |   |   |
| Student not accepted  |   |   |
| Student number captured  |   |   |
| Comments  |   |   |

**IMPORTANT**

This form should be accompanied by

* Certified copy of school leaving results
* Certified copy of identity document
* Certified copy of parent or legal guardian ID

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: HOD

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: Data Capturer Date