

# Application for academic admission

Please complete all pages of this form in BLOCK CAPITAL letters, and return to Academic Structure and Student Enrolment Services. Every section must be filled in. **Mark boxes with**  $\overline{X}$ , where appropriate.

# Application fees 2nd Semester 2016 On or before 31 May 2016 R215.00 On or before 30 June 2016\* R430.00 (Late application) No applications for the 2<sup>nd</sup> semester intake will be accepted after 30 June 2016. 2017 On or before 31 August 2016 R230.00 On or before 30 September 2016\* R460.00 (Late application) Amounts payable are subject to change.

	UNDERGRADUATE STUI	DIES				
ATES	2 <sup>ND</sup> SEMESTER INTAKE (current year)	End of June (only the following programmes in Engineering: Civil, Electrical (light and heavy current), Mechanical)				
OND	JANUARY INTAKE (next year)	End of August (all undergraduate programmes)				
САТІ	INTERNATIONAL STUDENTS					
APPLICATION DATES	2 <sup>ND</sup> SEMESTER INTAKE (current year)	End of May (only the following programmes in Engineering: Civil, Electrical, Electronic, Mechanical)				
	JANUARY INTAKE (next year)	End of August (all undergraduate programmes)				
BANKING DETAILS	Bank: Sta Branch: Bra Branch code: 055 Account no.: 240	ck the Application Guide or CUT website, www.cut.ac.za  ndard Bank ndwag i534 i454405 dent number or ID number				

	Use this checklist to ensure that you h	nave					
ı	Proof of payment (application fee) attached.	√					
	Qualification selection section completed (in full).						
	Form signed by you and your parent/guardian.						
	Certified copies of the following documents are attached:	<b>√</b>					
	Identification document/passport document	✓					

Ш	tne	information/documents					
	•	Your academic record in respect of studies at another higher education institution, if applicable.					
	•	A certificate of good conduct if you are/were registered at another higher education institution.					
	•	Undergraduate applicants: National Senior Certificate (Grade 12) or equivalent qualification.					
Ī	5. Medical certificate (international students only).						
		ational Benchmarking Test (NBT) is compulsory and applicants are requested to take note and sign nfirmation.					

7	Postal address	Physical address	Contact details	Application status
BLOEMFONTEIN	Private Bag X20539 Bloemfontein 9300	Lapeng Building 1 Park Road Bloemfontein	Tel.: +27 (0) 51 507 3911 Fax: +27 (0) 51 507 3199 E-mail: apply@cut.ac.za Website: www.cut.ac.za	You will receive separate e-mail and/or sms communication with regard to the outcome of your application status. It is therefore
WELKOM	PO Box 1881 Welkom 9460	Mothusi Road Thabong Welkom	Tel.: +27 (0) 57 910 3500 Fax: +27 (0) 57 396 3331 E-mail: apply@cut.ac.za Website: www.cut.ac.za	important to provide both your e-mail and cellphone contact details on this form.

SE	Receipt number	Amount	Date	)						
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OFFICE										Ī
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### **GENERAL INFORMATION AND INSTRUCTIONS**

- Complete only one form per person and indicate the choice of study.
- This form must be completed in BLOCK LETTERS and in full.
- An incomplete application form will delay your application process.
- Proof of payment for the application fee must accompany the application form. This must be submitted to one of the addresses provided on the first page.
- Applicants are subject to academic selection for all courses.
- This form, as well as the account application form, should be submitted to one of the addresses provided on the first page.
- CUT must immediately be notified of any change in address.
- Quote your student number in all correspondence.
- If you decide not to continue your studies after you have submitted your application, or if you would like to change your course, immediately notify Student Enrolment Services in writing.
- CUT reserves the right to refuse an application without providing reasons, but a student has the right to appeal against an unsuccessful application.

## **Admission requirements**

- A National Senior Certificate (Grade 12) or equivalent qualification.
- A candidate must score at least 27 or more points on the CUT scoring scale for the National Senior Certificate (NSC) examination.
- Subject requirements as per course.
- You may apply with your Grade 12 June or subsequent examination marks.

### **International Students**

All Foreign nationals who are interested to study at CUT and are in possession of a foreign qualification must be evaluated by the South African Qualifications Authority (SAQA) <a href="mailto:saqa.org.za">saqainfo@saqa.org.za</a> or <a href="mailto:swww.saqa.org.za">www.saqa.org.za</a>. This must be done before an application form is forwarded to the CUT. It is the responsibility of the prospective student to forward his/her documentation SAQA. NB. Please note that without such an evaluation the CUT is unable to make a valid assessment of your application. The following documentation should accompany your application to CUT:

- 1. Certified copy of your SAQA evaluation certificate
- 2. Certified copies of your foreign qualifications
- 3. Certified copy of your passport
- 4. Proof of payment of CUT required application fee

### Physical facilities and students with special needs

- CUT does not discriminate against students with special needs.
- Students with special needs should ensure that they are satisfied with the available physical facilities at CUT before applying for admission.
- If a student with special needs is admitted, special examination procedures will depend on the specific case and will be authorised based on the statement of results.



					-		Student	number		
					L	(for offic	e use only)			
	WHAT COURSE WOULD	YOU LIKE TO STUD	Y?							
NO	Course, e.g. NDip (Marketing):									
QUALIFICATION SELECTION	Please ensure that you qua CUT will not take the re-wri	alify for the above pro iting of Grade 12 sub	ogramme choice jects into consid	eration.						
NOI			Campus							
CA		emfontein campus			m campus	,				ŀ
Ĕ	Full-	time study (day class	ses)	Full-tin	ne study (day cl	asses)				
AL		emfontein campus			m campus					
g		-time study (evening		classe	me study (eveni	ng				
	class	ses)		ciasse	S)					
	Title (Mr/Ms/Mrs/Dr/Rev./etc.)				E-mail					
	Surname				Tel. (work)					
	Initials				Tel. (home)					
	First names (in full)				Cellphone number					
	Maiden name (if applicable)				Fax					
ဟ	Identity number				Population group	Africa	an	Coloured		
TAIL	International students only:				group	Indiar	<u> </u>	White		
L DE	Passport number Passport expiry date					Other	·			
¥	rassport expiry date									
PERSONAL DETAILS	Date of birth	YYYY	M M D D		Current and previous activity	Grade	e 11/12 er	Current	Previous	;
	Gender	Male Fe	male		activity (please indicate your current and previous activity – mark all relevant blocks)	Univertechn techn stude TVET collect Laborate	ersity of cology/ cology/ cikon ent -/FET ge student ur /employed			



			Student number
			(for office use only)
PERSONAL DETAILS (continued)	Marital status  Home language	Single Divorced Widow/er  English isiZulu Sesotho siSwati Tshivenda isiXhosa isiNdebele Sepedi Xitsonga Other (please specify)	International students only: Citizenship (indicate your country of origin)  Did you know?  The Central University of Technology, Free State has campuses located in Bloemfontein and Welkom.  In 2015, 48% of students were enrolled in priority Science, Technology, Engineering and Mathematics (STEM) fields.  CUT has 24-hour study venues.
	Physical address		PO Box/Private Bag
	City/town		Suburb/township
T ADDRESS	Province		City/town
ADDF	Postal code		Postal code
	Tel. (work)		
STUDEN	Tel. (home)		
S	Cellphone number		
	E-mail		
	Fax		



				Student numb	er
			(for of	ffice use only)	
	Title		PO Box/Private Bag		
	(Mr/Ms/Mrs/Dr/Rev./etc.)				
ESS	Surname		Suburb/township		
DDR	Full names		City/town		
ACCOUNT PAYEE (BILLING) ADDRESS	Address		Postal code		
(BILL	Suburb/township				
/EE	City/town				
PA	Province				
LND	Postal code				
000	Tel. (work)				
∢	Tel. (home)				
	Cellphone number				
	Title	7			
	(Mr/Ms/Mrs/Dr/Rev./etc.)				
<u>S</u>	Surname				
Ilsor	Full names				
mbr	Company				
) N	Relationship to student				
N/NEXT OF KIN (compulsory)	Physical address				
EXT	City/town				
ANA	Province				
PARENT/GUARDIA	Postal code				
/œn/	Tel. (work)				
ENT	Tel. (home)				
PAR	Cellphone number				
	E-mail				
	Fax				
		_			



		Student number  (for office use only)
	Types of Certificates acceptable  School-leaving certificate with university exemption  National Senior Certificate (Grade 12)  Certificate of conditional exemption on the grounds of age  NATED 191/NC(V) (TVET/FET Colleges' qualifications))  Other	Have you ever been suspended or refused admission to any post-secondary institution?  Yes No  If yes, please provide details
ADMISSION REQUIREMENTS	School-leaving details  Highest grade passed to date  Date of school-leaving examination  Examination no. (if already available)  Name of school attended  City/town  Province	Have you been found guilty of a criminal offence?  Yes No  If yes, please provide details
	Postal code  Will you apply for subject recognition or exemption?  Yes No	Please indicate whether you are a CUT staff member or a dependant of a staff member.  Yes No  If yes, provide staff number



		Christonia mirrobar
		Student number
		(for office use only)
	Are you enrolled at or do you intend to enrol at another tertiary institution?	Do you have any special needs?
	Yes No No	Yes No No
	If yes, where?  Were you previously registered as a student at another	If yes, please indicate which one of the categories below is most applicable to the nature of your special needs:
ed)	institution?	Communication (talking, listening) Multiple
(continu	Yes No No If yes,	Emotional Physical (behaviour, psychological) Physical (moving, standing, grasping)
ADMISSION REQUIREMENTS (continued)	where? Student no.	Hearing Sight (blindness, reduced vision, glasses)
ON REQU	Did you know?	Learning (difficulties in learning)
ADMISSI	CUT promotes access with success. Students are supported to become graduates that will be competent and innovative employees. Some of you will become entrepreneurs and job creators!  The Peer Mentorship Programme in each faculty aims to provide CUT students with a supportive environment that will motivate and help you develop to maximum personal and academic potential.  Check out the CUT Graduate Attributes online at <a href="http://www.cut.ac.za/graduate-attributes/">http://www.cut.ac.za/graduate-attributes/</a> .	Other  In order for CUT to facilitate support, please provide details regarding the nature of your special need, e.g. use of wheelchair, crutches.
		The university must be informed of certain special needs to determine whether it is able to make special arrangements to accommodate persons with special needs. Confidential advice can be obtained from the Unit for Students with Special Needs.
NOIL	Are you applying for a loan (NSFAS)?  Yes No	Did you know?  CUT has a Careers Office that will equip you with the necessary competencies to successfully compete in the highly competitive labour market, namely job-hunting skills, mock interviews, etc.
FINANCIAL SECTION	Do you intend to study with a bursary?	The university has its own radio station, CUT FM. Get your campus news on the air waves!
FINANG	Yes No	
	Awarded by	



		;	Stude	nt nu	mber		
(f	or offic	e use	only)				

ADDITIONAL INFORMATION

I have decided to study at CUT for the following reason (please select only one option)

Information from CUT school visit	Internet (CUT website)
Career shows; open days	Information from family, friends, CUT students
Information from staff at school/faculty	Media (newspapers, radio, magazines, brochures etc.)
Other (please specify)	

# Did you know?

- CUT loves sport. We have great facilities and teams for netball, soccer, rugby, volleyball, hockey, basketball, tennis, table-tennis, karate, and athletics.
- The institution's Wellness Centre will take care of your health and psychological counselling, academic support, reading development, social work services, and chaplaincy services.
  - The institution's Gospel Choir is a multiple-award-winning team.



	Student number							
(	for offic	e use	only)					

			DECLARATION BY	STUDENT	
1.	I, 1	the undersigned			(full names and
		rname)	(ID number), assisted by	I	(full names and surname of
	pa	rent/guardian) hereby declare that:			
	1.1		nd procedures relating to students; iiversity of Technology, Free State (C	UT) I commit myself to compliance wi	in the Calendar – Part I), as well as all Central th all rules, regulations, policies and procedures ons, policies and procedures forming part of my
	1.3	I am completing and signing this declaration an All particulars as provided to CUT are true and and its duly authorised verification agents to for of verification information for the purpose of ver	correct, failing which my registration ward my personal information, as we ifying my personal credentials and re-	vill be cancelled with immediate and a Il as any information that I have provid cords,	automatic effect; and that I have authorised CUT ded in support of my application, to the suppliers
	1.5	The agreement arising from the signing of this a that this application only becomes a valid and b from the Section: Student Enrolment Services;			concluded in Bloemfontein or Welkom, provided ntein or Welkom. Proof of the latter is available
	1.6 1.7	I will immediately notify the Section: Student En In terms of the Promotion of Access to Informati necessary by CUT;			personal information to third parties, as deemed
	1.8	I grant permission to CUT to submit progress re to my parents and/or guardians and/or sponsor		ner applicable information related to n	ny studies / activities and/or counselling at CUT,
2.		reby renounce any possible action against the Ce		State and indemnify the Central Univ	ersity of Technology, Free State from any claim
	that	may arise from the following:			
	2.1 2.2 2.3	Any loss of or damage to property, movable or any injury, illness or death; Any event, incident or accident;	mmovable, including any consequen	tial damage directly arising from dama	ige to such property;
	2.4 2.5	Any legal costs or expenses relating to claims of Any costs incurred for medical treatment; where	e such loss, damage, illness, injury, de	eath, event or incident arises from my	visit to, training at and/or accommodation at the ort that may occur during my period of study at
3.		Any liability that may result from furnishing verif			
4.	Irres payr	pective of any bursary or loan that has been rec nent of all tuition, class, residence and other fees	eived or is to be received, I hereby a , of whatever nature, owed to the Cer	accept liability/accountability, as the retrail University of Technology, Free S	esponsible person, for the prompt and punctual
5. 6.	I her befo	eby accept and confirm that I will not occupy any eby accept and confirm that I will not attend any cla re all minimum fees have been paid and all outsta	asses of CUT before the minimum cla anding payments arising from previou	imable fees have been paid, provided s commitments have been settled.	•
7.		reby accept liability/accountability for the payment mitments with respect to payments.	t of all legal fees of CUT, including at	torneys' and client fees, as well as co	llection fees, if I should fail to honour any of my
8. 9.	I am	aware of the fact that my enrolment is only valid s application is accepted, it will constitute part of t			ding acceptance of this application by CUT.
10.	I her furth	eby undertake to respect the provisions of the Co ermore undertake to purchase all original works, es of original works, or copyright licences on origi	opyright Act and I indemnify CUT from as required for my studies, from my	any claims that may arise from alleg	
SIG	NED .	AT	ON THIS	DAY OF	20
SIC	SNA <sup>T</sup>	TURE OF STUDENT:			

NB: All student rules, regulations, policies and procedures are available upon request from the Section: Student Enrolment Services and are also available for perusal at the Library & Information Centre.



	Student Number							
(for office use only)								

## **DECLARATION BY PARENT/GUARDIAN**

								_
1.	I, the undersigned			/ <b>f</b> II	names a	nd cur	nama	٥f
١.	parent/guardian)			•	reby decla		name	OI
	purchagaaraian,		(15 110	iiiibei, iie	icby accid	iic tiiat.		
	1.1 I have verified the information contained in the above form,	and that the particulars co	ntained therein are true a	nd correct	•			
	1.2 I have familiarised myself with the contents of the declaration and consequent agreement with CUT, entered into by my m	n given by my son/daughter				ing of the	e specifi	ed
	1.3 I am aware of the fact that there are student rules, regulation	ns, policies and procedure						
	another authorised body or person. I confirm that I am awa							
	additional student rules, regulations, policies and procedure					oliance w	ith such	ì;
	1.4 I will immediately notify the Academic Structure and Studen				· ,			
	1.5 My son/daughter may enter into any bursary and/or loan ag							
	1.6 In terms of the Promotion of Access to Information Act, Act information to third parties, as deemed necessary by CUT;	t No. 2 of 2000, I nerewith	grant permission to CU1	to disclos	e my son/a	augnter	s persor	ıaı
	1.7 I grant permission to CUT to submit progress reports, cou	inselling information and o	ther applicable informatio	n related	to my son	dauchte	r'e etudi	عما
	and/or activities and/or counselling at CUT to his/her sponsi		unor applicable illiorinatio	ii iciatoa	to my som	adagiito	i o otuui	00
	1.8 I, the undersigned, hereby acknowledge that the registration		son/daughter in any stud	dies at C	JT is volun	tary and	that su	ch
	participation may (depending on the programme for which h	ne/she registers) include, b	ut not be limited to, resea	rch, pract	ical evaluat	ion, labo	ratory a	nd
	other experiments, exposure to hazardous substances, exp							
	tours, and travelling during the course of such tours, and ac							
	I furthermore acknowledge that I am aware that there are kn							
	its related activities for which he/she chooses to register, a							
	property in his/her possession or under his/her control and/o of my son/daughter, but also from the actions, omissions a							
	vehicles, procures, consumables or substances which he/sl			ullulligs, i	aciiilles, de	iective e	quipine	ш,
2.	I hereby renounce any possible action against CUT, and indemni			vina.				
	2.1 Any loss of, or damage to, property, movable or immovable				mage to suc	ch prope	rtv:	
	2.2 Any injury, illness or death;	, 3. ,		<b>J</b>	3		-7 /	
	2.3 Any event, incident or accident;							
	2.4 Any legal costs or expenses relating to claims or lawsuits an							
	2.5 Any costs incurred for medical treatment, where such loss,							
	in any voluntary activity or action which is not a pre-requis	site for my son/daughter's	studies and/or for the obt	taining of	the qualific	ation for	which r	ny
	son/daughter is registered at CUT; and	matica from and to OUT as	كنسون لمومنسو والمربور برازيام والألم	:				
3.	2.6 Any liability that may result from furnishing verification inform I accept that my son/daughter participates in the above activities					nd thoras	with	
3. 4.	I hereby agree that the agreement arising from the signing of the							in
т.	Bloemfontein or Welkom, provided that this application only become							
	in Bloemfontein or Welkom. Proof of the latter is available from the							
SIG	NED AT	ON THIS	DAY OF		20			

SIGNATURE OF PARENT/GUARDIAN: