

# DIPLOMA N4-N6 / NCV LEVEL 2-4 APPLICATION FORM

All application forms must be posted back to City View College Admin office. Address supplied on page 2

# CLOSING DATE: 12 February 2010

# PERSONAL INFORMATION AS PER IDENTITY DOCUMENT

| TITLE (MR, MRS, MS, etc.)       |      | RS | RSA I.D/PASSPORT No.       |       |  |      |  |
|---------------------------------|------|----|----------------------------|-------|--|------|--|
| INITIALS                        |      | M  | AIDEN NAME (Married woman) |       |  |      |  |
| SURNAME(AS PER ID)              |      | KN | NOWN AS                    |       |  |      |  |
| FIRST NAMES IN FULL (AS PER ID) |      |    |                            |       |  |      |  |
| GENDER:                         | MALE |    | FEMALE                     |       |  |      |  |
| DATE OF BIRTH                   | Day  |    |                            | Month |  | Year |  |
| Age on 1 February 2010          |      |    |                            |       |  |      |  |

Definition of Disability :

A physical or mental impairment which is long term or recurring and that substantially limits prospects of entry into or advancement in employment e.g. hearing impairment, visual impairment, rheumatoid arthritis, multiple sclerosis, etc.

| Do you have a permanent disability?                          | YES |  | NO |  |  |
|--|-----|--|----|--|--|
| If YES, specify disability and attach a medical certificate: |     |  |    |  |  |

### PLEASE PROVIDE VALID CONTACT DETAILS TO AVOID BEING DISQUALIFIED

| PHYSICAL ADDRESS (Street Address)            |           |          |     |      |  |
|--|-----------|----------|-----|------|--|
| PROVINCE                                     |           | POST COL | DE  |      |  |
| HOME TELEPHONE NUMBER                        | AREA CODE |          | NUM | IBER |  |
| CONTACT NUMBER OF PERSON<br>STAYING WITH YOU | AREA CODE |          | NUM | IBER |  |
| CELL/MOBILE NUMBER                           | NUMBER    |          |     |      |  |
| E-MAIL ADDRESS and/or FAX NO.                |           |          |     |      |  |

#### **EMPLOYENT HISTORY (optional)**

FULL TIME; PART TIME; TEMPORARY; VOLUNTEER; LEARNERSHIPS; BUSINESS OWNER, ETC.

#### WHERE DID YOU HEAR ABOUT THE ROSTEC?

| Newspaper /<br>Advertisement  |  | School / University  |  | Family / Friend |  |
|-------------------------------|--|----------------------|--|-----------------|--|
| Someone in the banking sector |  | Department of Labour |  | Other           |  |

| I DECLARE THE FOLLOWING  | INITIAL |
|--|---------|
| I am currently unemployed.   |         |
| I am a South African Citizen with full SA citizenship.   |         |
| I am under the age of 30.  |         |
| I have completed Matric (Optional) or similar qualification  |         |
| I do not have a criminal record or pending criminal record.  |         |
| I a Lawful abiding citizen   |         |
| I do not know of any reason that will prevent me from attending all the required training sessions or influence my attendance at work or from completing the courses successfully in the period specified (year starting 25 January 2010). |         |

#### **Admission Requirements**

- Orientating for all college, regulations & timetables
- Fully completing registration form and returning it to registrar timeously two ID photos and certified ID Copy
- Minimum academic requirements for each level of entry
- Minimum installment (includes exam fees & admission costs)
- Proof of residence i.e Water & lights for sponsor (optional)
- Proof of sufficient funds (Foreign applicants only)
- Tuition for all N Courses starts at 13h00

I declare that I am aware of the rules of this application and that I understand them. I declare that the information supplied in this application is true and correct. I understand that any false information will automatically disqualify me from being part of the City View College.

Signature \_\_\_\_\_

Date \_\_\_\_\_

(Candidates are responsible for their own travel. Accommodation can be arranged.

Tel.; 011 333 9722 / 083 360 4758 Email;

admin@cityviewcollege.co.za

Website; www.cityviewcollege.co.za

Cnr Kerk & Mooi street, 111 meubel Building

10<sup>th</sup> Floor Suite 1002.

P.O.BOX 8101, Johanneburg 2000

## **BANKING DETAILS**

| Account Name   | - City View College (PTY) Ltd |
|----------------|-------------------------------|
| Bank           | - FNB (First national Bank)   |
| Account Number | -                             |
| Account type   | - Cheque                      |
| Branch Name    | -                             |
| Branch Code    | -                             |