



# UNIVERSITY OF MPUMALANGA

## APPLICATION FORM FOR ADMISSION IN 2015

ALL APPLICANTS MUST COMPLETE THIS FORM

Please complete this form carefully and in block letters, then return it to us by either physically dropping it off at: University of Mpumalanga, c/o Lowveld College of Agriculture, corner R 40 White River Road & D725 Road, Riverside, Mbombela, 1200; or by posting it to: The Admissions Officer, University of Mpumalanga, Private Bag X11283, Mbombela, 1200. You can get the process started by sending a scanned copy of this form to us at: [studentapplications@ump.ac.za](mailto:studentapplications@ump.ac.za) Your application will only be confirmed once we receive the original, signed copy of this form.

A non-refundable fee of R100 is payable upon application. Payment details are given on page 8. Please do not enclose cash and postal orders if you are returning this form by post.

### SECTION A ACADEMIC APPLICATION

#### 1. CHOICE OF STUDY PROGRAMME

(Please tick the box indicating your choice of study area. You may tick more than one box)

- Bachelor of Education: B Ed (Foundation Phase Teaching)
- Diploma: Hospitality Management
- Bachelor of Agriculture: B Agric (Agricultural Extension)
- Diploma: Plant Production

Note that these are all for the first year of study in 2015

Please indicate your: 1st choice

2nd choice

3rd choice

4th choice

#### 2. PERSONAL DETAILS

Title Mr  Mrs  Ms  Other

Last Name/Surname

First Name  Middle Name(s)

Gender (please tick ✓) Female  Male  Date of Birth  -  -

#### FOR OFFICE USE ONLY

Registration fee received  Date

Form captured by  Date

### 3. CITIZENSHIP

Are you a South African citizen? (please tick ✓)

Yes  No

If yes, South African ID Number  
(Please submit a certified copy of your ID)

If not South African permanent resident, state nationality

If not South African resident, passport number  
(Please submit a certified copy of your passport)

If not South African permanent resident,  
state the country where you have permanent residence

### 4. GENERAL PERSONAL BACKGROUND

Note that this information is required for statistical purposes and for us to ensure that we accommodate your study needs wherever we can (please tick the appropriate box)

Population Group

Black	Coloured	White	Indian	Chinese	Other
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Marital Status

Single	Married	Widow/er	Divorced	Separated
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Home Language

Afrikaans	English	IsiZulu	IsiNdebele	Sepedi	Xitsonga
SeSotho	Setswana	Siswati	IsiXhosa	Tshivenda	
Other (Please specify):					

Religious Affiliation

Christian	Hindu	Jewish	Muslim	None
Other (Please specify):				

Disability or  
Special Needs

It is important to inform us of your special needs at the time of application. You should also attach any supporting documentation that may assist us in trying to accommodate your needs

Blindness	Deafness	Partial Hearing	Partially Sighted	Learning Disability
Quadriplegic	Cerebral Palsied	Impaired Mobility	ADD/ADHD (chronic)	Paraplegic
Speech	Other (Please specify):			

Sport Involvement

The sport you formally participated in and the level of your participation

Sport	Level (School, Club, Junior/Senior Provincial: Junior/Senior National)

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## 5. CONTACT DETAILS - APPLICANT'S DETAILS

It is essential to carefully enter all your details here

Physical Address

City  Province

Country  Postal Code

Postal Address

City  Province

Country  Postal Code

Telephone Contact Details

Home number  -  -  Cell number  -  -

Business number  -  -  Fax number  -  -

e-mail

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## NEXT OF KIN DETAILS

Relationship Mother  Father  Other

Next of Kin Surname

Next of Kin Name

Next of Kin Initials

Next of Kin Title

Next of Kin ID Number

Next of Kin Postal Address

City  Province

Country  Postal Code

Next of Kin Contact Details

Home number  -  -  Cell number  -  -

Business number  -  -  Fax number  -  -

Next of Kin e-mail

**DETAILS OF PERSON LIABLE FOR SETTLEMENT OF FEES (This information is compulsory)**

Person to sign at the end of this form

Last Name/Surname

First Name  Initials

Title  ID Number

Postal Address

City  Province

Country  Postal Code

Telephone Contact Details

Home number  -  -  Cell number  -  -

Business number  -  -  Fax number  -  -

e-mail

**6. ACADEMIC HISTORY - SOUTH AFRICAN QUALIFICATIONS**

If you have matriculated or previously attempted Matric, please submit a certified copy of your Matric certificate

School Attending/ Attended Name of School

Address of School

Postal Code  Telephone Number

**Grade 11 Results**

To be completed by applicants writing South African Matric in 2014. You may also attach a certified copy of your Grade 11 report.

Subject	Mark(%)	Subject	Mark(%)

**Grade 12 Particulars**

To be completed by applicants writing a first attempt Matric in 2014.

School at which you will write your examination

Your Examination Number

NSC Subjects to be written in 2013

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

Grade 12 Particulars

To be completed by applicants who are upgrading their Matric in 2014.

Month and year in which examination will be rewritten.

School at which you will write your examination



Your Examination Number

NSC Subjects to be written in 2014

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

Examining Authority

To be completed by all applicants who will be writing a South African Matric in 2014. (Please tick ✓)

Eastern Cape	Free State	Gauteng	KwaZulu-Natal	Limpopo
Mpumalanga	Northern Cape	North-West	Western Cape	IEB

**INTERNATIONAL QUALIFICATION**

Complete this section only if you are writing or have written a NON-SOUTH AFRICAN EDUCATIONAL QUALIFICATION and require exemption from the Matriculation Board

Have you completed your qualification? (please tick ✓)

Yes  No

If yes, please submit certified copies of your school-leaving certificates

If your qualification examinations are still to be written, please complete the section below

Month of Examination

Examining Authority

Exam Number

Centre Number

A-Level Subjects	AS-Level Subjects	HIGCSE Subjects	If A, AS and HIGCSE levels are not applicable to you, please supply details in this column

## PREVIOUS AND CURRENT TERTIARY EDUCATION STUDIES

Certified copies of academic transcripts and code of conduct must be attached for all applicants. You are required to disclose all tertiary registration, even if you de-registered in the course of the year of study.

1. Study Programme (Degree/Diploma/Certificate)	<input type="text"/>				
Institution	<input type="text"/>				
Student Number	<input type="text"/>	Full-time	<input type="text"/>	Part-time	<input type="text"/>
Dates of Registration	From	<input type="text"/>	To	<input type="text"/>	
Date of Graduation (If applicable)	<input type="text"/>				
Status: P ( Passed); F (Failed); C (still to complete year / results not available); Z (Cancelled)	<input type="text"/>				

2. Study Programme (Degree/Diploma/Certificate)	<input type="text"/>				
Institution	<input type="text"/>				
Student Number	<input type="text"/>	Full-time	<input type="text"/>	Part-time	<input type="text"/>
Dates of Registration	From	<input type="text"/>	To	<input type="text"/>	
Date of Graduation (If applicable)	<input type="text"/>				
Status: P ( Passed); F (Failed); C (still to complete year / results not available); Z (Cancelled)	<input type="text"/>				

## SECTION B APPLICATION FOR RESIDENCE ACCOMMODATION

The University will have limited residence accommodation space. This will generally be shared accommodation and will be only be available to students registered on a full-time basis.

Do you wish to apply for University residence accommodation? (please tick ✓)      Yes       No

## SECTION C APPLICATION FOR FINANCIAL AID

Do you wish to apply for Financial aid support? (please tick ✓)      Yes       No

If yes, please complete the NSFAS application form at [www.nsfas.org.za](http://www.nsfas.org.za). If yes and you are applying for the B Ed programme, you qualify to apply for a Funza Lushaka bursary, managed by the Department of Education. You should apply directly at [www.funzalushaka.doe.gov.za](http://www.funzalushaka.doe.gov.za). Please contact our admissions office on 013-753 3065/7/8/9 if you would like to receive the NSFAS form by e-mail or through the post. You may also be eligible for support from one of the University of Mpumalanga bursary programmes and we will inform you if you have been successful for such bursary support.

## SECTION D LEGAL DECLARATION OF INDEMNITY AND UNDERTAKING

Applicants under the age of 18 years old must be assisted by their parent or guardian, (must be the same person listed under Next of Kin in Section 5 above).

I, THE APPLICANT, AND I, THE PARENT / GUARDIAN / NEXT OF KIN OF THE APPLICANT -

1. Acknowledge that the University does not accept responsibility for damage or loss in respect of property of the applicant or in respect of property brought onto University premises by the applicant.
2. Do hereby indemnify the University in respect of any damage caused by the applicant to University property or to the property of third parties, whether on or off the University premises, as a result of the applicant's actions either whilst on the University premises or whilst engaged in any activity related to the University.
3. Undertake, during the orientation period and for any period during which I am a registered student, to be bound by the rules and regulations of the University for the time being in force, including the rules and regulations of any University residence, club or society to which I may be admitted or become a member and by any requirements or conditions imposed by the University on me as a prerequisite to my registration as a student of the University in any faculty.
4. Certify that the information provided in this form and all supporting documentation is accurate and acknowledge that furnishing any false information may result in disciplinary proceedings being taken against the applicant.
5. Declare that I have furnished the University with all the information necessary to make an informed decision about my admission.
6. Undertake to pay unconditionally all fees, charges and equipment surcharges payable to the University as they fall due for payment for any period for which I am or may become a registered student of the University.
7. Consent to my examination results being made available to the relevant bursary donor(s) and / or lenders.

**ALL APPLICANTS MUST SIGN BELOW**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

AND, if the applicant is under the age of 18 years, assisted by (Full name of parent or legal guardian or next of kin):

_____	_____
First Name	Last Name/Surname
_____	_____
Signature of parent/legal guardian	Date

**PERSON LIABLE FOR SETTLEMENT OF FEES**

I undertake to settle all tuition and miscellaneous fees due to the University by due date. I may make suitable arrangements to settle the outstanding charges as per the University's Credit Policy as stipulated by the National Credit Regulator. If I do not settle by due date, I will pay interest at the rate prescribed by the University. I also consent to the University imposing credit control restrictions if the debt is not settled.

_____	_____
Full Name	Signature
_____	
Date	

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## APPLICATION FEE AND PAYMENT

ALL APPLICANTS are required to pay an application fee of R100.

### Methods of Payment:

1. Deposit exact amount into University's account:  
Standard Bank,  
Account Number: 333270347,  
Branch code: 052852, Nelspruit,  
Account name: University of Mpumalanga. (Please attach a copy of the deposit slip).
2. Cheque/postal order/bank draft made out to University of Mpumalanga.  
Write the applicant's name on the back.
3. Pay by cash or credit card at the Fees Office:  
Lowveld College of Agriculture / University of Mpumalanga  
Cnr R 40 White River Road & D725 Road, Mbombela.
4. For EFTs Use the applicant's Initials and Surname as the reference