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Email: info@kinghintsacollege.edu.za

APPLICATION FOR ACADEMIC ADMISSION 2016

PLEASE NOTE THAT: ALL APPLICATIONS WITH INCOMPLETE NUMBER OF REQUIRED DOCUMENTATION CAN RESULT IN YOUR APPLICATION NOT APPROVED.

THE COMPLETION AND RETURN OF THIS FORM DOES NOT GUARANTEE ADMISSION.

A PLACEMENT TEST **MUST** BE WRITTEN BY ALL NEW STUDENTS.

Teko Campus Centane Campus Dutywa Campus Willowvale Campus

Trackor FarmsMacibe RoadWillowvale RoadP/Bag X505P/Bag X3018P/Bag X501P.O.Box 215WillowvaleButterworthCentaneDutywa5060

4960 4980 5000 Cell : 082 852 9048

Website: www.kinghintsacollege.edu.za Email: info@kinghintsacollege.edu.za





Before handing in your form please use our checklist to check that

| SIRTH CERTIFICATE / IDENTITY DOCUMENT | (four certified copie | s for semester / year | student | s and five | copies f | or trimes | ter stude | nts) | | | | | | |
|---|-----------------------|-----------------------|--------------------------|------------|----------|-----------|-----------|------|---|---|--|--|--|--|
| ERTIFIED COPY OF PASSPORT (FOREIGN APPLICANTS) DRIES OF CERTIFICATES (OLIALIFICATIONS (four certified copies) | | | | | | | | | | | | | | |
| OPIES OF CERTIFICATES/QUALIFICATIONS (four certified copies) | | | | | | | | | | | | | | |
| ARENT'S PROOF OF INCOME / PAYSLIP | | | | | | | | | | | | | | |
| MOST RECENT SCHOOL PROGRESS REPORT (two certified copies) | | | | | | | | | | | | | | |
| ARENT'S ID OR PASSPORT (two certified copies) & ID COPY / BIRTH CERTICATE OF EACH HOUSEHOLD MEMBER | | | | | | | | | | | | | | |
| ROOF OF RESIDENCE (MUNICIPAL BILLING / LETTER FROM WARD COUNCILLOR / ACCOUNT STATEMENT ETC) | | | | | | | | | | | | | | |
| ROOF OF RESIDENCE (MUNICIPAL BILLING / LETTER FROM WARD COUNCILLOR / ACCOUNT STATEMENT ETC) FFIDAVIT BY PARENT | | | | | | | | | | | | | | |
| DEATH CERTICATE INCASE A PARENT IS DECEASED | | | | | | | | | | | | | | |
| | | For office use of | nly | | | | | | | | | | | |
| Application successful | | | Application unsuccessful | | | | | | | | | | | |
| Programme Manager | | <u> </u> | | | | | | | | | | | | |
| | | | Name | | | | Signatu | re | | | | | | |
| Date of capturing | | | d | d | m | m | У | У | У | У | | | | |
| Captured by | | | | | | | | | | | | | | |
| | | | Name | | | | Signatu | re | | | | | | |
| Student number | | | | | | | | | | | | | | |
| Enrolment type | | Full tim | ie | | | Part tin | ne | | | | | | | |
| Student notified on | | d | d | m | m | У | У | У | У | | | | | |
| Placement test | Υ | N | d | d | m | m | У | У | У | У | | | | |

| Interview | Υ | N | d | d | m | m | У | У | У | У |
|-----------|---|---|---|---|---|---|---|---|---|---|
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SECTION A: PERSONAL DETAILS

Please write one letter per block, starting in the first block. Leave one block open between names

| TITLE e.g. MR/MS/MRS INITIALS | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------|--------|------|------|----|-----|-----|------|-----|-----|-----|-----|------------|-----|---|----|-----|-----|--|--|--|--|
| SURNAME MAIDEN NAME | | | | | | | | | | | | | | | | | | | | | |
| FIRST NAMES | | | | | | | | | | | | | | | | | | | | | |
| DATE OF BIRTH d d m m y y y y | | | | | | | | | | | | | | | | | | | | | |
| IDENTITY NUMBER | | | | | | | | | | | | | | | | | | | | | |
| PASSPORT NUMBER | | | | | | | | | | | | | | | | | | | | | |
| GENDER | | | | | | | | | | | | | | | | | | | | | |
| MARITAL STATUS | | | SING | LE | | N | IARR | IED | | | WI | DOV | VED | | DI | VOR | CED | | | | |
| HOME LANGUAGE | | | | | | | | | | | | | | | | | | | | | |
| HOME LANGUAGE | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| | | | | SE | СТ | ION | B: | СО | NT | AC | ΤД | ΞIJ | AIL | S | | | | | | | |
| RESIDENTIAL (HOM | 1E) AC | DDRE | SS | SE | СТ | ION | B: | CO | NTA | AC. | ΤD | ĒΤ | AIL | S | | | | | | | |
| RESIDENTIAL (HON | 1E) AC | DDRE | SS | SE | ЕСТ | ION | B: | СО | NTA | AC | ΤD | E17 | AIL | S | | | | | | | |
| RESIDENTIAL (HOM | 1E) AC | DDRE | SS | SE | СТ | ION | B: | CO | NTA | AC | ΓD | ET | AIL | S | | | | | | | |
| RESIDENTIAL (HOM | 1E) AC | DDRE | SS | SE | СТ | ION | B: | СО | NT | AC | ΓD | | AIL | S | | | | | | | |
| RESIDENTIAL (HON | 1E) AC | DDRE | SS | SE | СТ | ION | B: | CO | NTA | AC" | Γ | | AIL | S | | | | | | | |
| | | | | | | | | | | AC | T D | ET | AIL | S | | | | | | | |
| POSTAL CODE | | | | | | | | | | AC | T D | | AIL | S | | | | | | | |
| POSTAL CODE | | | | | | | | | | AC | T D | | AIL | S | | | | | | | |
| POSTAL CODE | | | | | | | | | | AC" | T D | | AIL | S | | | | | | | |
| POSTAL CODE POSTAL ADDRESS (| | | | | | | | | | AC | T D | | AIL | | | | | | | | |
| POSTAL CODE | | | | | | | | | | AC | T D | | AIL | S | | | | | | | |
| POSTAL CODE POSTAL ADDRESS (| | | | | | | | | | AC | T D | | AIL | S | | | | | | | |
| POSTAL CODE POSTAL ADDRESS (| | | | | | | | | | AC | T D | | AIL | S | | | | | | | |

SECTION C: COURSE APPLICATION

WERE YOU PREVIOUSLY REGISTERED AS A STUDENT AT KING HINTSA TVET COLLEGE? IF YES, STATE THE PROGRAMME NAME AND STUDENT NUMBER

| YES NO |
|--------|
|--------|

| PROGRAMME | | STU | JDENT NUMB | R | | | | | |
|------------------------------|---------------|---------|------------|---|-------|-----|------------|-------|---|
| ACADEMIC PERIOD | YEAR | SEM 1 | SEM 2 | | TRI 1 | | TRI 2 | TRI 3 | |
| NC(V) COURSE OF STUDY APPLIE | D FOR ON | | | | | | | | |
| LEVEL 2 | | LEVEL 3 | | | | LEV | /EL 4 | | |
| N1-N6 (NATED) COURSE OF STU | DY APPLIED FO | OR ON | | | | | | | • |
| N1 | | N2 | | | | ſ | N 3 | | |
| N4 | | N5 | | | | 1 | N6 | | |

PLEASE INDICATE YOUR FIRST & SECOND CHOICE WITH 1 OR 2

| NATIONAL CERTIFICATE VOCATION | ONAL NC(V) LEVEL 2 – 4 | |
|---|------------------------|--|
| Engineering & Related Design | Teko Campus | |
| Electrical Engineering | Teko Campus | |
| Civil Engineering | Teko Campus | |
| Primary Agriculture | Teko Campus | |
| Hospitality | Centane Campus | |
| Tourism | Centane Campus | |
| Generic Management | Dutywa Campus | |
| Marketing | Dutywa Campus | |
| Information Technology & Computer Science | Dutywa | |
| Finance, Economics & accounting | Willowvale Campus | |
| Office Administration | Willowvale Campus | |
| NATIONAL CERTIFICATE (N1-N6) EN | GINEERING | |
| Carpentry (N1-N3) | Msobomvu Campus | |
| Civil Engineering (N4- N6) | Msobomvu Campus | |
| Electrical (N1-N3) | Msobomvu Campus | |
| Motor Mechanics (N1 – N3) | Msobomvu Campus | |
| Plumbing (N1-N3) | Msobomvu Campus | |
| Bricklaying (N1- N3) | Msobomvu Campus | |

| NATIONAL N DIPLOMA (NATED N | 4-N6) |
|-----------------------------------|-------------------|
| Farming Management (Agriculture) | Teko Campus |
| Public Relations | Dutywa Campus |
| Public Management | Dutywa Campus |
| Marketing Management | Dutywa Campus |
| Human Resource Management | Willowvale Campus |
| Financial Management | Willowvale Campus |
| Management Assistant | Willowvale Campus |
| Business Management | Willowvale Campus |

ACADEMIC ADMISSION DOES NOT AUTOMATICALLY GUARANTEE RESIDENCE ADMISSION AS RESIDENCE ACCOMMODATION IS LIMITED

| OLO HOL | | | SNDART | | |
|--|--------------|--------|--------------|--|-------------|
| HIGHEST GRADE COMPLETED | | | | | |
| PLEASE PROVIDE DETAILS OF SUBJECTS PA | ASSED I | N RESI | PECT TO THE | QUALIFICATION ABOVE | |
| NAME OF INSTITUTION (school, college etc) | | | | | |
| | | | | | |
| | | | | | |
| SUBJECT | | | MARK | /RESULT | YEAR PASSED |
| | | | | | |
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| | <u> </u> | | | | |
| IF YOU ARE STUDYING AT PRESENT, PLEAS | SE PRO | VIDE D | ETAILS IN RE | SPECT OF THE QUALIFICATIO | N |
| NAME OF INSTITUTION (school, college, etc.) | | | | | |
| QUALIFICATION ENROLLED FOR | | | | | |
| SUBJECT | | | | MARK/RESULT | |
| | | | | | |
| | | | | | |
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| | | | | | |
| DETAILS OF SENIOR CERTIFICATE (if applic | able) | т | | T | 1 |
| EXAMINING AUTHORITY (e.g. EC, KZN) | | YEAR | WRITTEN | AGGREGATE AS SHOWN ON SENIOR CERTIFICATE | |
| | | | | | |
| ENTER THE MARK RANGE SHOWN ON YOU CERTIFICATE e.g. 950-1199 | R SENIO | R | | | |
| | | | | | |
| MATRIC TYPE/ENDORSEMENT | | | | | |
| - | | | DIPLOMA EN | IDORSEMENT | |

SECTION E: ACCOUNT DETAILS

If employer, bursar or sponsor is responsible for payment, a letter from the employer, bursar or sponsor must be attached.

The STUDENT will be held responsible for payment of fees should the employer, sponsor or bursar not pay

| SOURCE OF FUNDING | | | | | | | | | | | | | | |
|-------------------------|----------------|--|-------|----|--|---|---|------|--|--|---|-----|---|--|
| SELF | PARENT | EN | ИРLОY | ER | | | ı | BURS | AR | | 0 | THE | ₹ | |
| SURNAME OF EMPLOYE | R/BURSAR/SPON | SOR | | | | | | | | | | | | |
| FIRST NAME | | | | | | | | | | | | | | |
| POSTAL ADDRESS | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| POSTAL CODE | | | | | | | | | | | | | | |
| TEL | | | | | | | | | | | | | | |
| FAX EMAIL | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| CONTACT DETAILS OF PA | ARENT/GUARDIA | N | | | | | | | | | | | | |
| RESPONSIBLE FOR PAYN | 1ENT | | | | | | | | | | | | | |
| RELATIONSHIP (e.g. moti | her, guardian) | | | | | | | | | | | | | |
| SURNAME | | | | | | | | | | | | | | |
| TITLE | | INITIAL | S | | | | | | | | | | | |
| IDENTITY NUMBER | | | | | | | | | | | | | | |
| ACCOUNT ADDRESS | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| POSTAL CODE | | | | 1 | | 1 | 1 | 1 | <u>1 </u> | | | | | |

| TEL WORK TEL HOME CELL FAX EMAIL | | | | | | | | | | | | | | | | | | | | | | |
|---|--|-------|--------|-------|---------------|--------|-------|-------|--------|-------|--------|--------|--------|--------|-------|--------|--------|--------|--------|---------|-------|-------|
| DO YOU IN | | | | | | | | | ırm n | nust | he c | YE | | and | han | dedi | in wi | N(| | nuire | 4 | |
| | If so, please note that a separate application form must be completed and handed in with the required documentation. | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE RESPONSIBI | | | - | JARD | IAN/ | SPON | ISOR | | | | | | | | | | | | | / | | |
| SIGNATURE OF WITNESS DATE:// | | | | | | | | | | | | | | | | | | | | | | |
| SIGNATURE OF WITNESS DATE:// SECTION F: STATISTICAL INFORMATION | | | | | | | | | | | | | | | | | | | | | | |
| ETHNIC GR This questi Education | | | ed to | | | | | | | | | | | | | | | sforı | matio | on of | High | er |
| BLACK | | (| COLO | OURE | D | | | INDI | AN | | , | WHIT | Έ | | 1 | ASIA | N | | (| OTHE | R | |
| CITIZENSHI | | A S | OUT | H AF | RICA | N CI | ΓΙΖΕΙ | N, PL | EASE | TICI | (ON | E OF | THE | FOL | LOW | ING | ОРТІ | ONS | | | | |
| International | applic | ant w | ith pe | erman | ent re | siden | ce | | | | Intern | ationa | al app | licant | with | temp | orary | reside | ence | | | |
| INTERNATI PERMIT IN you alread | ORD | ER T | O RE | GIST | ER It | is yo | our c | wn i | respo | | | | | | | | | | | | | me If |
| Type of pe | rmit | | | | | | | | | | | | | | | | | | | | | |
| Expiry date | 2 | | | D | | D | | M | | N | 1 | | Υ | | Υ | | Υ | | Υ | | | |
| DISABILITY This inform | | will | not | disad | lvant | tage | your | арр | licati | on; k | (ING | HINT. | SA T | VET | Colle | ge si | ирро | rts in | ıclusi | ive le | arnin | g |
| Blindness | | | | | Cere | bral | palsy | / | | | | | | | | | Ph | ysica | l disa | ability | / | |
| Deafness | | | | | Autis | tic sp | ectr | um d | disor | ders | | | | Beha | aviou | ıral/d | cond | uct d | isorc | ler | | |
| Partial sigh | tedne | ess/ | | | Psych | niatri | c dis | orde | r | | | N | 1ild t | o mo | oder | ate ir | ntelle | ectua | l abi | lity | | |

| Hard of hea | aring | Epilepsy | | | Specific learnii | ng disability | |
|----------------------------|------------|-------------------|--------------|-------------|------------------|-----------------|--|
| Attention d hyperactivi | | der with / withou | ıt | | | | |
| ADDITIONA | AL MEDICAI | CONDITIONS (II | N CASE OF AI | N EMERGENC | Υ) | | |
| Allergies | | Asthma | | Blood disor | der | Heart condition | |
| Diabetes | | Epilepsy | | Chronic med | dication | | |
| | | | | | | | |

SECTION G: GENERAL INFORMATION

WHERE DID YOU HEAR ABOUT KING HINTSA TVET COLLEGE?

| FRIENDS/FAMILY | TEACHERS | EXHIBITION | VISIT TO YOUR SCHOOL | CHURCH GATHERING/COMMUNITY MEETING | |
|----------------------|-------------------------|------------|----------------------------|---|--|
| PROMOTIONAL ITEMS | COMMUNITY NEWSPAPERS | WEBSITE | RADIO | SOCIAL MEDIA i.e. FACEBOOK,TWITTER etc | |

SECTION H: LEGAL UNDERTAKING

GENERAL

- The language medium for all lectures, test(s) and examinations is English
- The college reserves the right of admission
- Your student number must be quoted in all further correspondence
- The college may at any time, without prior notification, change the student code of conduct or any policy document
- Foreign students must submit a study permit

INDEMNITY AND CONSENT

I indemnify the college against any claims arising out of injuries, illnesses or loss suffered by me during the course of, or arising during my studies. I undertake not to institute any claim against the college, its principal or any staff member on account of any loss suffered during the course of my studies during practical work or on college excursions. In addition, I also indemnify the college from any medical costs arising from any such injuries obtained. I hereby consent:

- · to participate in any practical work done at the college, which might involve the use of tools and machinery
- to accept full responsibility for any injuries that I might sustain through the use of this machinery
- to participate in college educational excursions and in extra mural activities including games, sports etc.
- to be transported by college transport and or public bus/taxi

I UNDERTAKE:

- to acquaint myself with the rules, regulations and instructions applicable to the programme that I have enrolled for
- to conform to the student code of conduct and student disciplinary procedure
- · to attend at least 80% of classes
- to pay all fees owed by myself to the college
- to supply the college with full and correct information on all documentation
- to notify the college in writing and immediately in the event of change of address and/or telephone number
- to notify the college in writing if I am unable to complete my studies due to illness
- · to abide by the rules and regulations of the college and to abide by all policies of the college

FEES

- ☐ I take note of the fact that if the student cancels for any reason after the stated dates:

 31 March for a YEAR programme 28 February for a SEMESTER ONE OR 31 July for a SEMESTER TWO programme 31 January, 31 May, 30 September for TRIMESTER programmes I shall be personally liable for all (full) college fees charged to his/her account for the remainder of the year or semester 1 or semester 2
- The balance of fees per semester must be paid in three (3) equal monthly instalments and the fees for a year programme must be paid in SIX (6) equal monthly instalments (the last instalment must be paid by the end of July
- I undertake to pay all fees on the due date prescribed by the college in respect of the programme for which I enrol, as well as all other fees which I may owe to the college
- Cancellation of registration will be considered only for the following reasons for refund purposes: course being
 phased out, student death or medical unfitness (medical certificate required). The college management will make
 the final decision.
- I understand that in the event of the college taking legal action against me for the recovery of any amounts due
 or the enforcement of any rights of the college, I shall be liable to pay all legal fees on an attorney and client
 scale, including collection commission, which may become due to the college in terms of this application

DECLARATION BY PARENT/GUARDIAN

- ✓ I declare that the information supplied by me on this form is to the best of my knowledge true and correct
- ✓ I confirm that I am the parent/legal guardian of the above mentioned student
- ✓ In so far as applicable to me, I undertake, should the student be admitted to the college: to acquaint myself with the rules and regulations of the college and to comply with the rules and regulations

| Signature of parent/guardian | d | d | m | m | У | У | У | У |
|------------------------------|---|---|---|---|---|---|---|---|

Physical Address: 218 Mthatha Road | N2.
Postal Address: Private Bag X3018 | Butterworth | 4960

SECTION I: STUDENT CODE OF CONDUCT

In applying for registration each student (supported by his or her legal guardian if she/he has not attained legal majority) agrees to:

STUDENT CONDUCT ON CAMPUS

As a student of King Hintsa TVET College, you must

- adhere to the rules and regulations of the College
- be dressed appropriately at all times
- be in possession of a valid student card and must be able to produce your student card on request at any time, readily
 and willingly and without remonstration
- not be in possession of any dangerous weapons/objects
- not be under the influence of any drugs with narcotic effect or any alcoholic beverage
- obey all instructions by any member of the academic or administrative staff
- respect the property and furnishings of the college and guard against any activity that could cause damage to any property or harm to any person
- treat everybody with respect and courtesy, no matter their rank, gender, race or creed.

CLASS ATTENDANCE

Students must

- o aim for attendance of between 80% 100%
- attend all classes, lectures, practicals, workshops, tests, assessments and examinations (note: irregular class attendance in the case of learnerships will result in non-payment of stipends)
- o attend enrichment seminars, workshops, projects when organized
- be punctual at all times
- o become a life-long learner
- o buy all prescribed textbooks and relevant equipment (where applicable)
- o compile your portfolio of evidence (PoE), if applicable
- o do additional reading to broaden your knowledge
- o do homework, assignments, projects, etc. regularly
- o make every endeavour to pass all assessments
- o meet deadlines on work that you had to do or research
- o participate in group discussions (where applicable)
- o participate in practical training on and off campus (when needed)
- o switch off all cellular phones during class time

FEES

Students must

- o pay all fees due to the College, timeously (where applicable)
- try to attend most of the social and sport activities organized by the College/SRC

□ **Note:** Extracts taken from the student disciplinary code. Disciplinary actions, offences, disciplinary procedures and detailed explanation will be made available to the student in the student diary.

Physical Address: 218 Mthatha Road | N2.
Postal Address: Private Bag X3018 | Butterworth | 4960

DECLARATION BY STUDENT

I declare that the information supplied by me on this form is to the best of my knowledge true and correct In so far as applicable to me, I undertake, should the student be admitted to the college to acquaint myself with the rules and regulations of the college and to comply with the rules and regulations

| Signature of student | d | d | m | m | У | У | У | У |
|----------------------|---|---|---|---|---|---|---|---|
| | | | | | | | | |