

CONTACT DETAILS Please write in capital letters

(please provide the dialling code):

Home Tel		Work Tel		Cell phone number	
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Email address	
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Physical address:	
	Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Postal address:	
	Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

DETAILS of Mother/Father/Guardian or Spouse Please write in capital lettersPrefix/Title Mr Miss Mrs Ms Other:Relationship to you

Surname	
First Name	
Telephone	
Cellphone	
Email address	

Postal Address	
	Code: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

GENERAL BACKGROUND Details required for statistical purposesReligious affiliation; Population Group: BLACK COLOURED INDIAN WHITE

Home Language; (in alphabetical order)

Afrikaans	<input type="checkbox"/>	SeSotho	<input type="checkbox"/>	Disability / Special needs
English	<input type="checkbox"/>	Setswana	<input type="checkbox"/>	
isiNdebele	<input type="checkbox"/>	SiSwati	<input type="checkbox"/>	
isiXhosa	<input type="checkbox"/>	Tshivenda	<input type="checkbox"/>	
isiZulu	<input type="checkbox"/>	Xitsonga	<input type="checkbox"/>	
SePedi	<input type="checkbox"/>	Other (please specify)	<input type="text"/>	

What has been your main activity in the last year?

Studying	<input type="checkbox"/>	School	<input type="checkbox"/>	Employment	<input type="checkbox"/>	Travelling	<input type="checkbox"/>
Please provide details							

ACADEMIC HISTORY

ADMISSION CRITERIA IN LINE WITH THE NATIONAL SENIOR CERTIFICATE			
DEGREE	Bachelor of Arts	Bachelor of Arts Extended	Bachelor of Theology
POINTS	25	22-24	25
NATIONAL SENIOR CERTIFICATE	English 50% NO failed subjects	English 55% NO failed subjects Admissions Assessment Compulsory	English 50% 4 designated subjects min 50% NO failed subjects
Subjects excluded from point calculation: Life Orientation and other non-designated subjects			
NON-SOUTH AFRICAN, MATURE STUDENT, MATRICULATON CERTIFICATE: see website or prospectus			
NB: A student may be required to write the admission assessment			

SCHOOLING DETAILS: Details of school attended or still attending

Name of School

Telephone number

Please fill in Grade 11 marks if you are in matric this year or Grade 12 final marks if you have written matric.

Date matric examination was / will be written:

Please note that Life Orientation, Computer Application Technology, and Tourism are not degree designated subjects

SUBJECT	Percentages
1	
2	
3	
4	
5	
6	
7	
8	

NB: Does the school leaving certificate state you have met the requirements to study for a bachelor degree? YES: ___ NO: ___
If not, you are not eligible to study for a degree at St Augustine College.

NB: Please provide certified copy of your school leaving certificate if you have already completed your schooling.

OTHER QUALIFICATIONS / REGISTRATIONS (Please provide the relevant transcripts)

Degree/Diploma	Full-time or Part-time	Dates of Registration		Date of Graduation	Name of Institution
		Starting date	End date		

LETTER OF MOTIVATION:

This should be a one-page letter explaining why you would like to study at St Augustine College. It should include what subjects you wish to study and why. The letter should also tell us a little about yourself and your future goals.

LEGAL DECLARATION OF INDEMNITY

1. Neither the College nor any employee or representative of the College acting in his/her capacity as such shall be liable for:
- any damage arising out of the death, bodily injury, loss of health or injury of any student or the destruction of or damage to any property owned by or in the custody of any student; or
 - any loss of a purely pecuniary nature suffered by any person whatsoever, whether such damage or loss be caused by the negligent or intentional act or omission, or any other wrongful act or omission of the College or any employee or representative of the College, or arising out of ownership of any domesticated animal.
2. The applicant hereby indemnifies the College against any claim made by any person whatsoever against the College in respect of any damage arising out of the negligent or intentional act or omission or any other wrongful act or omission of the applicant.

I, the undersigned applicant –

a) declare and warrant that I am :

- (i) a **major** or
 (ii) a **minor** assisted as far as in law needs be by (full name and surname of guardian)
(Tick (i) or (ii) whichever is applicable)

in his/her capacity as my guardian:

relationship to applicant

- acknowledge and understand the provisions of the declaration of indemnity above and hold myself bound thereby; and by all other provisions of this application; and by the rules of the College for the time being in force or as they may be altered, for any period during which I am a registered student.
- declare that I know that, should I during my attendance at the College undergo training in any workshop, laboratory or any other place of training or education or attend any excursion, exercise, sporting activity, event of any nature whatsoever or gathering (whether authorized by the College or not and whether authorised by law or not) whether within or without the College, I may be exposed to risks to life or to bodily injury or to health or illness or of damage to property, and that, in the full knowledge of this, I consent to run all the risks involved in any such training, excursion, exercise, sporting activity, event or gathering;
- certify that the information given in this form is accurate and complete.

Signature of Applicant: _____

Date: _____

LIABILITY FOR FEES - The student is to complete this section

I undertake to pay unconditionally all fees, charges and equipment surcharges payable to the College as and when they fall due for payment, for any period for which I **am or may become a registered student / the said applicant is or may become a registered student** of the College. *(Delete whichever is not applicable)*

Signature of Applicant: _____

Date: _____

and if applicable

Guardian's details:

Full name and surname _____ Signature of Guardian _____

Address of Guardian _____

Telephone of Guardian _____

CHECKLIST

Before submitting the application form, have you attached the following:

- Proof of payment of the application fee (**R100**) clearly stating your name and surname?
- Certified copy of ID or passport
- Certified copy of school leaving certificate
- Motivation letter
- CV (if out of school more than a year)
- HESA certificate for non- South African applicants

PLEASE NOTE THAT THIS APPLICATION WILL NOT BE PROCESSED WITHOUT ALL THE REQUIRED DOCUMENTS.

Submission by post/fax or email to: The College Administrator Undergraduate Studies,
 St. Augustine College of South Africa, P.O.Box 44782, Linden 2104
 Our contact details: Tel: 011 380 9000/9010 Fax: 011 380 9200/9210
 Email: applications@staugustine.ac.za

Thank you for your application. We will be in touch soon with a response.