STADIO

FACULTY OF EDUCATION & HUMANITIES
SCHOOL OF EDUCATION
FORMERLY
EMBURY
INSTITUTE FOR HIGHER EDUCATION

2020 APPLICATION FORM

Postgraduate Studies

PROGRAMME OF STUDY

☐ Postgraduate Certificate in Education in Senior Phase and Further Education and Training Teaching (NQF 7)

PERSONAL DETAILS (Applicant)

Surname: **Title:**

First Names:

ID Number: **Date of Birth:** D D M M Y Y Y Y

Gender: Male ☐ Female ☐ **Race:** African ☐ Indian ☐ Coloured ☐ White ☐

ACADEMIC QUALIFICATIONS (Applicant)

Title of Qualification:

Year: Current ☐ Completed

Institution Received From:

Please note:
Full academic transcripts with qualification exit statement must accompany this application in addition to other required documents.

CONTACT DETAILS (Applicant)

Residential Address:

Postal Code:

Postal Address:

Postal Code:

Cell Number: **Home Telephone Number:**

Occupation: **Work Telephone Number:**

Email Address:

FOREIGN STUDENT DETAILS

Country of origin/nationality:

Passport Number:

DISABILITIES (If any)

Please specify your disability rating for each of the following in the table below:

Disability Type	Communicating	Seeing	Hearing	Self-care	Remembering	Walking
No difficulty	☐	☐	☐	☐	☐	☐
Some difficulty	☐	☐	☐	☐	☐	☐
A Lot of difficulty	☐	☐	☐	☐	☐	☐
Cannot do at all	☐	☐	☐	☐	☐	☐

HOW DID YOU HEAR ABOUT US (Please specify)

☐ Facebook ☐ Friend ☐ Google ☐ Twitter ☐ Newspaper
☐ Magazine ☐ School career day ☐ Embury student ☐ School visit ☐ Other

PERSONAL & CONTACT DETAILS (Guardian) (IF APPLICANT IS UNDER THE AGE OF 21)

Surname: **Title:**

First Names:

Cell Number: **ID Number:**

Home Number: **Relationship:**

Email Address:

Name of Employer: **Work Telephone Number:**

Address of Employer:

Postal Code:

DECLARATION

I/We, the undersigned, by my/our signature hereto consent, warrant and agree that:

1. All the information supplied in this application is true, correct and up to date and that any false information provided may lead to the termination of my enrolment at any time and that STADIO may inform others, including Government agencies, of this false information. In the event of my enrolment being terminated as a result of false information I/we will not be entitled to a refund of any fees paid and will be liable to settle the balance of any outstanding fees.
2. STADIO can obtain credit records from any NCR registered credit bureau for the purpose of determining my/our credit worthiness.
3. I/we have been informed about the relevant fees and are able to afford paying same. I/we will supply further personal financial information to STADIO if required, to determine affordability should my/our credit worthiness as per (2) above be in doubt.
4. STADIO may use and process the personal data or information (excluding personal financial information) supplied on this application form whilst the applicant is a student of STADIO and after the student has left STADIO for the purposes of verifying personal details, administrative procedures, verification of education qualifications, collection of outstanding fees and for the protection of your health, safety and welfare whilst enrolled at STADIO.
5. In the event of the applicant being minor, I/we, the parents and/or guardian consent to the enrolment of the applicant with STADIO.
6. This application, and any subsequent enrolment, will be subjected to the Terms and Conditions as contained in the Enrolment Contract, available upon request and on our website at www.embury.ac.za.

Signature of Applicant: ..... **Date:** .....

Kindly note: Application takes +-10 working days to fully process, due to academic approval process.

THE FOLLOWING DOCUMENTS MUST BE ATTACHED:

- ☐ A certified copy of ID
- ☐ A certified copy of Matric Certificate
- ☐ Other academic qualifications
- ☐ Fee schedule with module choices signed and completed
- ☐ Proof of payment for R400 non-refundable application fee
- ☐ A certified copy of the affidavit Criminal Law (Sexual Offences and Related Matters) Amendment Act 32 of 2007.

BANKING DETAILS:

Name:	Embury Institute for Higher Education
Bank:	Standard Bank
Branch & code:	Glenwood 042526
Account number:	052 913 864
Payment ref:	Surname and name

FOR OFFICE USE ONLY

09.12.19

Name of Advisor:

Verification Checklist:

☐ A certified copy of ID ☐ Fee schedule with module choices signed and completed ☐ A certified copy of the affidavit Criminal Law
☐ Other academic qualifications ☐ Proof of payment for R400 non-refundable application fee ☐ A certified copy of Matric Certificate

HEAD OFFICE DETAILS

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