

# DE AAR CAMPUS ENROLLMENT FORM

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VAN RIEBEECK STREET  
 DE AAR  
 7000

Student Number															
Surname								Initials				Title			
ID Number						DOB	DD	MM	YYYY	Nick name					
Full Name(s)															
RSA Citizen	Y	N	Nationality												
Immigration Date	DD	MM	YYYY	Passport No					Alternative ID				ID Type		
Gender	M	F	Ethnic				Marital			Maiden					
Car Registration					Transport				Accommodation						
Mother Tonque								Home Language							
Highest Grade								Year Passed							

**Contact Details and Address:**

Academical / Home Residential

Financial / Postal

General / Study Residential

	<u>Academical / Home Residential</u>	<u>Financial / Postal</u>	<u>General / Study Residential</u>
Surname			
Name			
Initials			
Title			
ID			
Phone No H			
Phone No W			
Fax No			
Cell No			
E-mail			
Website			
Adres Line 1			
Adres Line 2			
Adres Line 3			
Adres Line 4			
Postal Code			

**Office Use Only**

Fin OK

YES

NO

Guardian No

**Next of Kin Information:**

Surname		Cell No	
Name		E mail	
Initials		Website	
Title		Adres Line 1	
ID		Adres Line 2	
Phone No H		Adres Line 3	
Phone No W		Adres Line 4	
Fax No		Adres Line 5	
Relation			

Student Type:	Private	Employer	Bursary
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**Registration Info: Office Use Only**

Campus						Time Period				
Course				Ins Pro Code			Group No			
Study Direction						Level				
May Enroll	Y	N	HeadCount	Y	N	Workshop Stud	Y	N	Reg Type	

Hostel	Y	N	Hostel Name				Room			
Previous Years						Apprentice	Y	N	3 Subjects	4 Subjects
Province:						Type of Agreement:				
Disabilities										

Subjects	Level	Office Use Only		
		Subject Code	V/D/S/K	Period
Total				

**Agreement**

I hereby declare that the before mentioned information on this form is accurate and correct and should I, the applicant, be accepted as a student, I will unconditionally adhere to the rules and regulations of this college.

Signed: Parent/Guardian (Where Applicable)

Signed: Applicant

Date

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Date

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In case the applicant is a minor, the parents'/guardians' agreement will be binding.