

Student number		1 Qualification code (eg BA, BCom, BSc)									
2 Surname, Initials, Title (eg Smit R J Mr)											
3 First names											
4 Maiden name and/or previous surname											
5 Date of birth		6 (Mark with <input type="checkbox"/>)			Male		7 Language for correspondence (mark with <input type="checkbox"/>)		Afr		
					Female				Eng		
8 Identity or Passport number (Mark with <input type="checkbox"/>)		ID	PP								
9 Are you physically disabled? (Mark with <input type="checkbox"/>)										YES	NO
If "YES", indicate the nature of your disability (Refer to the Information Brochure for code and further information)										Code	
10 Telephone numbers (dialing code and number) (eg 011-8394671 x2769)		Home			Cell						
		Work			Fax						
		email									
11 May your name and address be given to fellow students for academic purposes? (Mark with <input type="checkbox"/>)										YES	NO
12A Postal address and postal code					12B Physical address (See Information Brochure)						
					Contact telephone number (office hours)						
13 Examination centre code — See Examination Brochure					14 Home language						

INFORMATION GIVEN IN QUESTIONS 15–18 IS USED FOR STATISTICAL PURPOSES ONLY

15 Nationality		Code		16 Population group		Code		
17 Occupation		Code		18 Economic sector See Information Brochure		Code		
19 In which format would you like to receive your registration material (Calendars, etc) in future? (Mark only one with <input type="checkbox"/>)						E-mail	CD	
							Printed copy	
20 Concurrent registration at two approved South African tertiary institutions is not allowed without permission from both institutions If you have already registered, or intend to register concurrently at another approved South African tertiary institution for 2005, supply the following information:								
(i) Other institution				(ii) Degree/Diploma				
21 Give particulars of the last tertiary institution at which you were registered before 2005								
(i) Institution		(ii) Year		(iii) Mark with <input type="checkbox"/> : Undergraduate		Postgraduate		
22 Did you pass at least one study unit at the abovementioned institution? (Mark with <input type="checkbox"/>)							YES	NO
23 Give particulars of all previous registrations at Unisa and/or another university or technikon, a nursing college or a teachers' college, starting with the most recent registration								
Institution eg Unisa, UCT, JCE		Degree/Diploma eg BA, BCom, HED		Year(s) eg 1998–2000		Student number at other institution		
						If degree/diploma was completed, state year		
24 Do you want to apply for exemption from study units passed at the abovementioned institution? (mark with <input type="checkbox"/>) If "YES", refer to the Information Brochure for further information and an application form							YES	NO

QUESTIONS 25 TO 32 MUST BE ANSWERED

25	Highest school qualification (eg STD 10/Grade 12)	Examination number
Indicate your matriculation status with <input checked="" type="checkbox"/> : — See <i>Information Brochure</i>		
(i) Full exemption		Conditional exemption
(ii) When and under which Education Department did you write the STD 10/Grade 12 examination?		Y E A R Prov
(iii) Indicate all subjects you wrote at Standard 10/Grade 12 level, with grade and symbols obtained eg English HG D		

26	Should a library card be issued to you? (Only "Yes" if you are not in possession of a library card and need access to the library during 2005) (Mark with <input checked="" type="checkbox"/>)	YES	NO
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27	Qualification code (eg BA, BCom, BSc etc)	Field of specialisation See <i>Information Brochure</i>
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28	Proposed major subjects/modules See <i>Information Brochure</i>
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29	Will your qualification be completed with this registration (Mark with <input checked="" type="checkbox"/>)	YES	NO
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30	Study units for which you wish to register See <i>Information Brochure</i> for examples	FOR OFFICE USE ONLY																																																																																							
	<table border="1"> <thead> <tr> <th rowspan="2">Course Code (eg ECS101-6)</th> <th rowspan="2">N D P</th> <th colspan="2">Semester</th> <th rowspan="2">Lang. (E or A)</th> </tr> <tr> <th>1</th> <th>2</th> </tr> </thead> <tbody> <tr><td>1</td><td></td><td></td><td></td><td></td></tr> <tr><td>2</td><td></td><td></td><td></td><td></td></tr> <tr><td>3</td><td></td><td></td><td></td><td></td></tr> <tr><td>4</td><td></td><td></td><td></td><td></td></tr> <tr><td>5</td><td></td><td></td><td></td><td></td></tr> <tr><td>6</td><td></td><td></td><td></td><td></td></tr> <tr><td>7</td><td></td><td></td><td></td><td></td></tr> <tr><td>8</td><td></td><td></td><td></td><td></td></tr> <tr><td>9</td><td></td><td></td><td></td><td></td></tr> <tr><td>10</td><td></td><td></td><td></td><td></td></tr> <tr><td>11</td><td></td><td></td><td></td><td></td></tr> <tr><td>12</td><td></td><td></td><td></td><td></td></tr> <tr><td>13</td><td></td><td></td><td></td><td></td></tr> <tr><td>14</td><td></td><td></td><td></td><td></td></tr> <tr><td>15</td><td></td><td></td><td></td><td></td></tr> <tr><td>16</td><td></td><td></td><td></td><td></td></tr> </tbody> </table>	Course Code (eg ECS101-6)	N D P	Semester		Lang. (E or A)	1	2	1					2					3					4					5					6					7					8					9					10					11					12					13					14					15					16					
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Signature: Advisor

31	Particulars of payment — See "Payment of Fees" in the <i>Information Brochure</i>								Library access card	R
All payments payable to UNISA. Credit card: Mastercard or Visa only										
Cash	Cheque	Postal order	Money order	Bank draft	Credit card	TMO	Absa Electronic Deposit	Study fees	R	
R	R	R	R	R	R	R	R	Matriculation exemption fees	R	
Credit card no.								CV number		
Expiry date	M	M	Y	Y	Y	Y				
If payment is on budget a/c mark period in months with <input checked="" type="checkbox"/>								6	12	
Card holder:										
(a) ID number										
(a) Surname and initials										
(b) Card holder's signature										

32	DECLARATION AND UNDERTAKING — I declare that all the particulars furnished by me on this form are true and correct, and I undertake to comply with the rules, regulations and decisions of the University, and any amendments thereto, and have taken note of advice which may be applicable to students in general and/or to the field of study for which I am registered.
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Surname: First Names:

Date: Student's signature: UNISA P.1753(B)