

APPLICATION FOR UNDERGRADUATE ADMISSION

(International)

Note: Completed applications for all campuses must be forwarded to the Applications and Information Office at:

Postal Address

University of KwaZulu-Natal Applications and Information Office Durban 4041

Physical Address

University of KwaZulu-Natal Applications and Information Office Shepstone Building Level 4 Howard College Campus King George V Ave/Mazisi Kunene Rd Glenwood Durban

FOR OFFICE USE ONLY:				
NAME:				
STUDENT NO:				
DEGREE/DIPLOMA: ————————————————————————————————————				
LOCAL:				
INTERNATIONAL:				

Please read these notes before completing the attached application form

1. The non-refundable **application fee** or proof of payment MUST accompany this application form. **International and local applicants**: Application fees can be paid by electronic transfer/bank deposit. The banking details are as follows:

Name: UKZN Foreign Deposit
Acc. No: 05 308 2826

Bank: Standard Bank
Branch: Westville

Branch Code: 045426 Reference: F001 11402 with applicant's full name

Type of Account: Business Current Account Swift Code: SBZAZAJJ

- The application form MUST be completed as fully and as accurately as possible to avoid delay in processing. Use names appearing on the identity document when completing this form.
- 3. By completing and submitting this form you are consenting to the processing of your personal information by the University in terms of Protection of Personal Information Act, 2013 as set out in the Section 18 Notice (see page 8).
- 4. The University of KwaZulu-Natal is an English medium university. International students from non-English speaking countries must provide proof of English proficiency. Please refer to the Undergraduate Prospectus for further information.
- 5. Applicants whose previous degrees were obtained at a university other than University of KwaZulu-Natal must submit certified copies of their previous degree certificates with their application. **For international applicants**: Please provide translated copies where applicable. Also refer to the Undergraduate Prospectus for further information.
- 6. If you have **attended another university**, please submit a full academic record or you must arrange for the Registrar of that University to submit a full academic record for all years of study and a certificate of conduct to the University of KwaZulu-Natal.
- 7. All international applicants must have their school-leaving credentials evaluated by the Matriculation Board.

Entrance Requirements:

Legal entrance requirements:

The NSC for degree admission or Secior Certificate with matriculation exemption (or equivalent) is required for admission to degree studies in South Africa.

Applicants with non-South african school-leaving qualifications need to submit proof that they qualify for admission to degree studies at South African universities in terms of the guidelines provided by the Higher Education South Africa (HESA) – (Matriculation Board). Please refer to their website at: www.hesa.org.za. Further information can be obtained from:

- 1. The Matriculation Board at Tel: +27 (0)12 591 4401/2 or
- University of KwaZulu-Natal Applications Office at Tel: +27 (0)31 260 2212/7877 or +27 (0)33 260 5212
- 3. University of KwaZulu-Natal International Office at Tel: +27 (0)31 260 1092.

NB: Colleges will not consider your application for selection if you have not submitted your HESA evaluations.

College entrance requirements:

In addition to the legal entrance requirements, South African applicants should meet the minimum points for specific programmes. All applicants should meet subject requirements and levels of performance for admission to certain programmes. Also note that the number of applications received far outnumber the spaces available at University. Therefore, meeting the minimum requirements for application does not guarantee admission to the University.

Application Fees:

A non-refundable application application form fee is payable on submission of the application form.

SA applicants on-time
SA applicants late
SADC and Africa
Countries outside Africa
\$153

No late international applications accepted. The banking details are provided on the last page. Please provide your details on the deposit slip and submit proof of payment on submission of your application.

Closing dates:

Honours and Postgraduate Diplomas – Semester 1: 30 September

- Semester 2: 30 April

Masters Coursework – Semester 1: 31 October – Semester 2: 30 April

Masters (Research) and Doctoral studies - no closing dates

Students with Disabilities:

Please contact the Co-ordinator at the Student Counselling Centre for information on services, equipment and support available to students.

 Howard College –
 Tel: +27 (0)31 260 3070/3140

 Pietermaritzburg –
 Tel: +27 (0)33 260 5213/5233

 Westville –
 Tel: +27 (0)31 260 7706/7888

 Edgewood –
 Tel: +27 (0)31 260 3665

Needing Assistance:

If you need assistance in selecting programmes, choosing your majors, career or personal guidance or testing, you can contact a counsellor at one of our Student Support Services:

Howard College - Tel: +27 (0)31 260 2668/2669
Pietermaritzburg - Tel: +27 (0)33 260 5233
Westville - Tel: +27 (0)31 260 7337/7751
Edgewood - Tel: +27 (0)31 260 3653

Financial Aid Queries:

Agriculture, Engineering and Science -

Tel: +27 (0)31 260 7064/1502

+27 (0)33 260 6145

Health Science - Tel: +27 (0)31 260 2912/4359/7889

Humanities – Tel: +27 (0)31 260 3258 +27 (0)33 260 5758 Law and Management – Tel: +27 (0)31 260 1106/7839

+27 (0)33 260 5757

Residence Queries:

For all residence queries, please phone the relevant campus:

Edgewood – Tel: +27 (0)31 260 3611
Howard College – Tel: +27 (0)31 260 2282
Medical School – Tel: +27 (0)31 260 2282
Pietermaritzburg – Tel: +27 (0)33 260 6226
Westville – Tel: +27 (0)31 260 8070

Health Care Insurance: (Applicable to International Applicants only)

In terms of the Immigration Amendment Act 19 of 2004, any prospective student coming to the Republic of South Africa must provide proof of medical cover with a medical scheme registered in terms of the Medical Schemes Act, 1998 Act 131 of 1998. The University of KwaZulu-Natal thus only accepts South African medical aid products approved in terms of the Medical Aid Schemes Act referred to above. To comply with the regulations, the University requires proof of full medical aid cover with a **South African**-based medical aid scheme for the full academic period of study (renewable annually). Such cover must cover the **minimum** of hospitalisation, emergencies and day-to-day cover, including medicine and doctor's visits. It is thus advisable to make the necessary financial arrangements for the medical aid cover *prior* to your entry into South Africa.



KWAZULU-NATAL APPLICATION FOR **ADMISSION**

FOR OFFICE USE ONLY:		
Student no:		
App Fee Pd: R	Date:	
Receipt No:		
Into ITS By:	On:	

		rersity of Natal/University of Durba	ın Westville/University of Kwaz	Zulu-Natal before	e? YES	NO
• Ir yes, what v	was your Student No. (if availal					
. TERM OF	ENTRY AND CHOICE	OF PROGRAMME				
Year of entry:	: 2 0 Ent	try Term: Semester: 1	2 Year of study for	r this degree/di		
	lomas/Programmes applying fo	or:	Т	T	OFFICIA	L USE
Choice Order	Campus	Name of Degree/Diploma	Majors	Full or part-time	Approved	Date
1						
2						
3 4						
	re that the programme name/s	are indicated				
1 10030 01130.	— — — — —	are muicated.				
2. PERSC	ONAL DETAILS					
Title: Mr	Mrs M	fliss Ms	Other			
Surname:						
Maiden Name:						
ID No:			(South Afric	can applicants o	nnlv)	
Persal number:			ers only)	een - Inte	,	
Persai number.	DAY MONTH	YEAR	ers only)			
Date of Birth:						
Marital Status: Married Single Divorced Widowed						
Race: African Coloured Indian White Other:(specify)						
Gender: Male	e Female					
Home Language: Nationality:						
3. RESIDE	ENCY					
· ·	permanent resident of SA?	YES	NO			
• If not, wha	at is your country of permanent	residence?				
 Passport N 		1515				
Expiry Date	DAY MONTH	YEAR				
	Permit No:	<u> </u>	(if in possession)			
• Residence	DAY MONTH	YEAR	ur in possession			
Expiry Date	e:					

Present activity (Please tick) *University student Technical College student 01 07 Teacher's Training College Labour Force (Employed) 02 Standard 10 pupil/Grade 12 learner Technikon Student 80 03 College of Nursing student 04 OTHER (* If university student, please state name of the last institution in section 7 on page 5 and submit your academic record and certificate of good conduct: NOTE: The code structure has been set up (by ITS) in terms of government reporting requirements. If you are employed, please complete the following: Name of Company/Institution Address of Company/Institution Post Code Telephone No. (Work): Area dialling code: Fee Account to Employer Yes No 5. ADDRESS AND CONTACT DETAILS Guardian/Parent (if under 21) or next of kin: Postal Address: Name: __ Address:___ Town/City: _____ _____ Postal Code: _____ Postal Code: Physical address: ____ Telephone Numbers: Work: Dial code: _____ No: ____ Town/City: _____ Home: Dial code: _____ No: ____ Country: _____ Postal Code: ____ Cell phone:_____ Email: _ Telephone Numbers: Relationship: Cell phone:___ Work: Dial code: _____ No: ____ Father Mother Spouse Home: Dial code: _____ No:____ Brother G/Parent Sister Email address:

4. POST-SCHOOL ACTIVITIES

Work/Home Fax: _____

Child

Other

Guardian

	last school-leaving certificate f school certificate/diploma:_	•									
	ation No:										
B: IN	ITERNATIONAL APPLICA	ANTS TO CHE	CK EQUIVA	LENCE	E WI	TH N	MATRICU	LATION BO	OARD		
e of	Matriculation Exemption alre	ady held: (Please	e tick one)								
01	Full Exemption				07	Oth	er Senior (Certificate			
03	Ordinary Conditional				80	NTC	C3/N3/NS	С			
04	Mature Age Exemption				09	Star	ndard 10 P	ractical			
05	Foreign Exemption				10	Oth					
06	Immigrants Exemption				11	Disc	cretionary l	Provision (Ser	nate exemp	tion)	
OTE	The code structure has been	n set up (by ITS)	in terms of go	vernme	nt re	portir	ng requirer	ments.			
	HIGH/SENIOR SCHOO	NAMF	YE	AR			Fxaminatio	on Authority		Grades/Forms	Passed
			From	То			LAGITIITATIC	on Additionty			
Higl	n School subjects (Internationa	al Students: state	subjects of la	st _{Fir}	nal ar	ada II	/'0' levels	Trial/Mocks	Grade 12	Matric or	·Λ' levels
_	ool-leaving certificate)		•	1 "	G/SC		Symbol	SG/HG/A		SG/HG/A	Symbo
							-				
	7 // OL IO OTHER										
PRE	VIOUS STUDIES										
	IN 10 T T 1 T 10 N 1 N 1 N 1 T		DEGREE/DIPLO	DMA/CI				DEGREE		YEARS ATT	ENDED
	INSTITUTION NAME		Name			Complete AWARD DATE Yes No			From	То	
						,,,	110				
		+									
					<u> </u>						
St	udent number(s) at previous ir	stitution:									
	ve you ever been refused enti 'Yes", provide the details:	•					n? YE \$	S	NO		
На	ve you ever been refused ent	ry to, expelled or	excluded from	a resid	ence	of an	y institutio	n? YES		NO ON	

8. MEDICAL INFORMATION						
8.1 DISABILITY INFORMATION						
	lents with disability, and will attempt to provide sure, that might require support?	upport where possible. NO If "Yes", please indicate:				
Persons with a Visual Impairment	Persons with a Physical Impairment	Persons with Diabetes				
Blind	Uses a wheelchair	Persons with Epilepsy				
Partially sighted	Uses crutches/callipers Persons with paraplegia/quadriplegia/	Persons with Cerebal Palsy				
Persons with a Hearing Impairment	hemiplegia/post-polio paralysis	Persons with Intellectual/Psychiatric/ Psychological Impairment				
Partially deaf	Other (please specify)	Persons with Medical/Chronic Ailments				
Mild to moderately deaf		that require support (Please specify) Other (Please specify)				
8.2 COMPULSORY FOR INTERNATIONA	L APPLICANTS ONLY	Other triease specify				
Health Insurance						
	ame) confirm that I will/have applied for medical c	cover with a medical scheme registered in terms				
of the Medical Schemes Act, 1998 Act 131 of	• • • • • • • • • • • • • • • • • • • •	Ç				
9. RESIDENCE APPLICATION						
Do you wish to apply for admission to Universit	ty Residence? YES NO					
If yes, which campus?	ard College Pietermaritzburg	Edgewood				
Medi	cal School Westville					
If you are unsuccessful in obtaining accommoda	ation in a University Residence, where will you st	ay?				
10. GENERAL INFORMATION						
By submitting this form you are giving UKZN pe application and to verify any information contain	ermission to process and assess your personal in led herein.	nformation for any purpose connected with this				
The University is committed to maintaining your	privacy at all times.					
Do you wish your personal information to be kept confidential between yourself and the University? YES NO						
Note: Disclosure is subject to the Promotion of Access to Information Act, Protection of Personal Information Act and other relevant laws.						
·						
Did any of your immediate family study at this University? YES NO If yes, state relationship to you:						
ii yes, state relationship to you.						
11. ENGLISH PROFICIENCY						
		`				
	programme at the University need to demonstra	te that they have obtained one of the following				
	levels of English proficiency: 1. A pass in an examination equivalent to English at South African Senior Certificate (NSC) HL or FAL level or at the Higher Grade (First or					
Second Language) for the South African Se		S				
2. A pass in English language at A-level, or O-	level (C-symbol or higher), or the International Ba	accalaureate or equivalent examination.				
• • • • • • • • • • • • • • • • • • • •	sfy (1) or (2) above and for whom English is a for					
	graduate studies, (7.0 for Postgraduate studies) on of the Test of English as a Foreign Language (
(electronic) version of the test.	on the real of English as a rolleigh Ealiguage (. O.E. D. of a coord of at least oo off the IDT				
Scores need to be submitted with application for	orms.					
Name of document:						

REFER TO THE UNDERGRADUATE PROSPECTUS FOR MORE DETAILS.

1	2. DECLARATION AND L	JNDERSTANDING				
To	be completed with the assista	ance of Parent/Guardian	n where applicant is not financially independent and u	nder the age of 18 (a minor).		
lf ı	my application is successful and I a	accept the offer of a place t	to study at the University of KwaZulu-Natal,			
1.	1. I undertake					
1.1 To comply with the procedures, rules and regulations of the University of KwaZulu-Natal						
	1.2 To inform the Registrar imm	,	,			
	, ,	0 0	tions that relate to the degree for which I am applying			
	1.4 To make alternate arrangem	ent for accommodation sno	ould the University accept me for the degree and cannot offe	r me accommodation		
2.	I/We hereby accept liability for the payment of all tuition fees or other fees that may be charged by the University as a result of my/his/her studies at the University.					
3.	. I am aware that my enrolment is valid only if it complies with the regulations of the degree concerned, notwithstanding the acceptance of this application by the University.					
4.	. I/We accept the responsibility of submitting all documents required by the University before the stipulated due dates.					
5.	. I declare					
	5.1 That I make this application	and give the declarations ar	nd understandings with the knowledge and consent of my pa	rent/guardian/employer		
	5.2 I warrant that the information registration if I have made a		nd correct and the University shall be entitled to declare the ission on this application.	contract void and cancel my		
L	Signature of Student	Date	Signature of Parent/Guardian	Date		
SI	URETYSHIP To be completed	where applicant is not f	inancially independent and under the age of 18 (a mi	nor).		
I, t wind ap sh tha	the undersigned lawful parent/guard th the above-named applicant for th plicable annual schedule of fees. The ip in any circumstances whatever, e at the aggregate amount owed to y	dian of the applicant, do here the due payment of all fees and the surety will operate as a co except with the University of ou by the applicant may fluc	eby bind myself to the University of KwaZulu-Natal as surety and other charges due and payable to the University of KwaZu ontinuing covering suretyship. I agree that I will not be release f KwaZulu-Natal's written consent and in particular, I shall not	in solidium and co-principal debtor lu-Natal in terms of the relevant d from liability under this surety-		
PΙ	ease print full name of Surety/Pare	ent/Guardian:				

DISCLAIMER

of the Finance Department of the University of KwaZulu-Natal.

Address:_

If any provision or part of a provision of this application form is found unlawful, void, or unenforceable, that provision or part of the provision is deemed severable from the application form and all other provisions of the application form will remain in full force and effect.

Date

Which will be my domicilium citandi et executandi (permanent residential address) for all purposes under this document, which means that I will accept service of all notices, documents and legal proceedings against me. In the event of my changing this address, I agree to inform the Student Debtors Section

Signature of Parent/Guardian

POPIA NOTIFICATION TO POTENTIAL AND EXISTING STUDENTS AND PARENTS OR GUARDIANS

The University of KwaZulu-Natal, located at King George V Ave, Glenwood, Durban, 4041, South Africa (hereinafter referred to as "UKZN" and/or "the University"), is required to process your personal information for any or all of the following reasons:

- To complete your application and/or registration for admission and/or re-admission and/or placement at the University;
- To facilitate your application for residence and/housing (if relevant);
- To facilitate the application process for bursaries for yourself (if relevant);
- To facilitate any internship and/or employment placement opportunities that may be identified by UKZN on your behalf (if relevant);
- To facilitate the process of allowing you access to the various University systems and premises;
- To facilitate the process of providing you with your class test and examination results;
- To communicate with you regarding University activities both for the duration of your study and thereafter;
- To facilitate the graduation process;
- For the various reasons pertaining to your studies and/ or attendance of various University activities and/or forums and/or enquiries;
- For statistical purposes;
- For marketing, communication and/or information purposes;
- For soliciting donations;
- As a good governance practice;
- For verification of degree completion, which will include your details being placed on the Alumni database, where after you may be contacted on occasion for information and/or marketing purposes.

The types of information that may be processed (dependent on the reason for processing as stated above) may include your:

- Name and surname;
- Maiden name (if applicable);
- Image;
- Identity number;
- Examination number and/or student number (where relevant);
- Matriculation certification details and/or results;
- University academic record (if relevant);
- Curriculum vitae (if relevant);

- Postal address;
- Residential address;
- Contact details;
- Next of Kin information;
- Citizenship;
- Gender
- Population group;
- Marital status;
- Home language;
- Details of disabilities (if applicable);
- Details of the secondary school that you attended;
- Parent/guardian information;
- Details pertaining to making payments.

The aforementioned information must be provided by yourself and/or your parent/guardian (if you are younger than 18 years of age). The provision of the afore-mentioned information is both a mandatory and a contractual requirement (to fulfil the contractual agreement between the University and yourself should you be accepted into the University for study) and the failure to provide same and/or an objection to use the information may result in your non-acceptance and/or registration at the University as your information is required for the legitimate reasons as mentioned in this document.

Your personal details may also be utilised by the University for marketing and/or communication and/or branding initiatives.

The University may also be bound by legislative requirements (such as those contained in the Higher Education Act 101 of 1997) and/or good governance practices to obtain and/ or retain the information for record keeping and/or statistical purposes.

UKZN will endeavour to ensure that the appropriate security measures are in place and/or implemented, for both electronic and paper based formats used for processing your personal information, to avoid any and all instances of security breaches.

Should a cross border transfer of your information be required, the University undertakes to ensure that the recipient of the information is bound to safe-guard your information in accordance with the requirements of the Protection of Personal Information Act 4 of 2013.

Recipients of your information may include the University, government structures, potential employers and/or research

institutions. Where your information is required for the research purposes, the University will endeavour to ensure that same is fully anonymised and de-identified.

You have the right to access and amend your personal information using the relevant University platform and you remain solely responsible for ensuring that your information is correct and up to date at all times. The relevant University platform will be communicated to you once registered and may be amended from time to time. The continuation and completion of the application and/or registration process by yourself is interpreted as your

specific and informed expression of will as required by the Protection of Personal Information Act 4 of 2013.

Should you wish to lodge a complaint in this regard, kindly contact the Information Regulator. The contact details are as follows:

Website: http://www.justice.gov.za/inforeg/ Address: The Information Regulator (South Africa) SALU Building, 316 Thabo Sehume Street, PRETORIA

Telephone: 012 406 4818

13. CHECKLIST	
Please ensure that the following relevant documents are enclo	osed with this application:
Have you indicated your choice of degree/diploma and campus?	YES NO
 Have you enclosed the proof of payment or non-refundable application fee? 	YES NO NO
 Have you enclosed all the required certified documentation: Copy of ID Document/Passport 	YES NO
Academic Record (if studied previously) Renglish translation	YES NO
 Degree Certificate (if studied previously) 	YES NO NO
 Senior Certificate/Matric Certificate/O/A Levels or relevant school-leaving qualification/certificate 	YES NO
- English Proficiency proof Compulsory for	YES NO
 Proof of HESA assessment applicants only 	YES NO NO
 Have you read and understood the medical insurance requirements (applicable to International Applicants only) Have you completed the residence section (10) if applicable? 	YES NO NO NO NO

YES

Have you filled in the application form in full?

Applications and Information Office www.ukzn.ac.za