



UNIVERSITY OF <sup>TM</sup>  
KWAZULU-NATAL  
INYUVESI  
YAKWAZULU-NATALI

# 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. Application fees sent by post should be paid by cheque or postal order, not cash. **Please ensure that cheques or postal orders are made out to the University of KwaZulu-Natal. International and local applicants:** Application fees can be paid by electronic transfer/bank deposit. The banking details are as follows:  
Name: UKZN Foreign Deposit                      Bank: Standard Bank  
Acc. No: 05 308 2826                              Branch: Westville  
Branch Code: 045426                              Reference: F001 11402 with applicant's full name  
Type of Account: Business Current Account    Swift Code: SBZAJJ
2. 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. 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.
4. 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.
5. 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.
6. 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](http://www.hesa.org.za). Further information can be obtained from:

1. The Matriculation Board at Tel: +27 (0)12 591 4401/2 or
2. 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 by 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 fee is payable on submission of the application form.

• SA applicants on-time	R200
• SA applicants late	R400
• SADC and Africa	R470
• Countries outside Africa	\$146

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

### 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.

### 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



# APPLICATION FOR ADMISSION

FOR OFFICE USE ONLY:

Student no:

App Fee Pd: R \_\_\_\_\_ Date: \_\_\_\_\_

Receipt No: \_\_\_\_\_

Into ITS By: \_\_\_\_\_ On: \_\_\_\_\_

- Have you been registered as a student at University of Natal/University of Durban Westville/University of KwaZulu-Natal before? YES  NO
- If yes, what was your Student No. (if available)?

## 1. TERM OF ENTRY AND CHOICE OF PROGRAMME

Year of entry:     Entry Term: Semester: 1  2  Year of study for this degree/diploma (eg. 1st):

Degrees/Diplomas/Programmes applying for:

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Choice Order	Campus	Name of Degree/Diploma	Majors	Full or part-time	Approved	Date
1						
2						
3						
4						

Please ensure that the programme name/s are indicated.

## 2. PERSONAL DETAILS

Title: Mr  Mrs  Miss  Ms  Other \_\_\_\_\_

Surname: \_\_\_\_\_

First Names: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

ID No:  (South African applicants only)

Persal number:  (teachers only)

Date of Birth:  DAY  MONTH  YEAR

Marital Status: Married  Single  Divorced  Widowed

Race: African  Coloured  Indian  White  Other: \_\_\_\_\_ (specify)

Gender: Male  Female

Home Language: \_\_\_\_\_ Nationality: \_\_\_\_\_

Religion (optional): \_\_\_\_\_

## 3. RESIDENCY

• Are you a permanent resident of SA?  YES  NO

• If not, what is your country of permanent residence? \_\_\_\_\_

• Passport No.:

• Expiry Date:  DAY  MONTH  YEAR

• Residence Permit No:  (if in possession)

• Expiry Date:  DAY  MONTH  YEAR

## 4. POST-SCHOOL ACTIVITIES

Present activity (Please tick)

*University student	01	<input type="checkbox"/>
Teacher's Training College	02	<input type="checkbox"/>
Technikon Student	03	<input type="checkbox"/>
College of Nursing student	04	<input type="checkbox"/>

Technical College student	05	<input type="checkbox"/>
Labour Force (Employed)	07	<input type="checkbox"/>
Standard 10 pupil/Grade 12 learner	08	<input type="checkbox"/>
OTHER ( _____ )	09	<input type="checkbox"/>

\* If university student, please state name of the last institution in section 8 on page 5 and submit 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	
			<input type="checkbox"/>	<input type="checkbox"/>	

## 5. ADDRESS AND CONTACT DETAILS

Postal Address: \_\_\_\_\_

\_\_\_\_\_

Town/City: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Physical address: \_\_\_\_\_

\_\_\_\_\_

Town/City: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Numbers:

Cell phone: \_\_\_\_\_

Work: Dial code: \_\_\_\_\_ No: \_\_\_\_\_

Home: Dial code: \_\_\_\_\_ No: \_\_\_\_\_

Email address: \_\_\_\_\_

Work/Home Fax: \_\_\_\_\_

Guardian/Parent (if under 21) or next of kin:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone Numbers:

Work: Dial code: \_\_\_\_\_ No: \_\_\_\_\_

Home: Dial code: \_\_\_\_\_ No: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

Relationship:

Father  Mother  Spouse

Brother  G/Parent  Sister

Child  Guardian  Other

## 6. HIGH SCHOOL DETAILS

Year of last school leaving certificate (equivalent to Grade 12):

Name of school certificate/diploma: \_\_\_\_\_

Examination No: \_\_\_\_\_

### NB: INTERNATIONAL APPLICANTS TO CHECK EQUIVALENCE WITH MATRICULATION BOARD

Type of Matriculation Exemption already held: (Please tick one)

01	Full Exemption		07	Other Senior Certificate	
03	Ordinary Conditional		08	NTC3/N3/NSC	
04	Mature Age Exemption		09	Standard 10 Practical	
05	Foreign Exemption		10	Other	
06	Immigrants Exemption		11	Discretionary Provision (Senate exemption)	

NOTE: The code structure has been set up (by ITS) in terms of government reporting requirements.

	HIGH/SENIOR SCHOOL NAME	YEAR		Examination Authority	Grades/Forms Passed
		From	To		
1					
2					

	High School subjects (International Students: state subjects of last school leaving certificate)	Final grade II/'O' levels		Trial/Mocks Grade 12		Matric or 'A' levels	
		HG/SG/O	Symbol	SG/HG/A	Symbol	SG/HG/A	Symbol
		1					
2							
3							
4							
5							
6							
7							
8							

## 7. PREVIOUS STUDIES

	INSTITUTION NAME	DEGREE/DIPLOMA/CERTIFICATE			DEGREE AWARD DATE	YEARS ATTENDED	
		Name	Complete			From	To
			Yes	No			
1							
2							
3							
4							
5							
6							
7							

- Student number(s) at previous institution: \_\_\_\_\_
- Have you ever been refused entry to, expelled or excluded from another institution? YES  NO   
If "Yes", provide the details: \_\_\_\_\_
- Have you ever been refused entry to, expelled or excluded from a residence of any institution? YES  NO   
If "Yes", provide the details: \_\_\_\_\_
- Do you owe fees to another institution? YES  NO   
If "Yes", provide the details: \_\_\_\_\_

## 8. MEDICAL INFORMATION

### 8.1 DISABILITY INFORMATION

The University is sensitive to the needs of students with disability, and will attempt to provide support where possible.

Do you have any disability, physical or otherwise, that might require support? YES  NO  If "Yes", please indicate:

Persons with a Visual Impairment

- Blind  
 Partially sighted

Persons with a Hearing Impairment

- Partially deaf  
 Mild to moderately deaf

Persons with a Physical Impairment

- Uses a wheelchair  
 Uses crutches/callipers  
 Persons with paraplegia/quadruplegia/  
hemiplegia/post-polio paralysis  
 Other (please specify)

Persons with Diabetes

- Persons with Epilepsy  
 Persons with Cerebral Palsy  
 Persons with Intellectual/Psychiatric/  
Psychological Impairment  
 Persons with Medical/Chronic Ailments  
that require support (Please specify)  
 Other (Please specify)

### 8.2 COMPULSORY FOR INTERNATIONAL APPLICANTS ONLY

#### Health Insurance

I \_\_\_\_\_ (name) confirm that I will/have applied for medical cover with a medical scheme registered in terms of the Medical Schemes Act, 1998 Act 131 of 1998.

## 9. RESIDENCE APPLICATION

Do you wish to apply for admission to University Residence? YES  NO

If yes, which campus?  Howard College  Pietermaritzburg  Edgewood  
 Medical School  Westville

If you are unsuccessful in obtaining accommodation in a University Residence, where will you stay? \_\_\_\_\_

## 10. GENERAL INFORMATION

By submitting this form you are giving UKZN permission to process and assess your personal information for any purpose connected with this application and to verify any information contained herein.

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: \_\_\_\_\_

## 11. ENGLISH PROFICIENCY

Applicants applying for admission into a degree programme at the University need to demonstrate 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 Senior Certificate.
2. A pass in English language at A-level, or O-level (C-symbol or higher), or the International Baccalaureate or equivalent examination.
3. For international applicants who do not satisfy (1) or (2) above and for whom English is a foreign language:
  - an overall band score of 6.0 for Undergraduate studies, (7.0 for Postgraduate studies) or
  - a test score of 550 on the paper version of the Test of English as a Foreign Language (TOEFL) or a score of at least 80 on the IBT (electronic) version of the test.

Scores need to be submitted with application forms.

Name of document: \_\_\_\_\_

REFER TO THE UNDERGRADUATE PROSPECTUS FOR MORE DETAILS.

## 12. DECLARATION AND UNDERSTANDING

**To be completed with the assistance of Parent/Guardian where applicant is not financially independent and under the age of 18 (a minor).**

If my application is successful and I accept the offer of a place to study at the University of KwaZulu-Natal,

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 immediately, in writing, if I change my address.
  - 1.3 To acquaint myself with all the rules and general regulations that relate to the degree for which I am applying.
  - 1.4 To make alternate arrangement for accommodation should the University accept me for the degree and cannot offer me accommodation.
2. I/We hereby accept liability for the payment of all tuition fees or other fees which 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 and understandings with the knowledge and consent of my parent/guardian/employer.
  - 5.2 I warrant that the information contained herein is true and correct and the University shall be entitled to declare the contract void and cancel my registration if I have made any misrepresentation or omission on this application.

Signature of Student

Date

Signature of Parent/Guardian

Date

**SURETYSHIP To be completed where applicant is not financially independent and under the age of 18 (a minor).**

I, the undersigned lawful parent/guardian of the applicant, do hereby bind myself to the University of KwaZulu-Natal as surety in solidum and co-principal debtor with the above-named applicant for the due payment of all fees and other charges due and payable to the University of KwaZulu-Natal in terms of the relevant applicable annual schedule of fees. The surety will operate as a continuing covering suretyship. I agree that I will not be released from liability under this suretyship in any circumstances whatever, except with the University of KwaZulu-Natal's written consent and in particular, I shall not be released by reason of the fact that the aggregate amount owed to you by the applicant may fluctuate and may at times be nil.

Please print full name of Surety/Parent/Guardian: \_\_\_\_\_

Identity no.: \_\_\_\_\_

Address: \_\_\_\_\_

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 of the Finance Department of the University of KwaZulu-Natal of any change in my address.

Signature of Parent/Guardian

Date

## DISCLAIMER

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.

## 13. CHECKLIST

**Please ensure that the following relevant documents are enclosed with this application:**

- |   |   |                          |                          |                          |                          |
|---|---|--------------------------|--------------------------|--------------------------|--------------------------|
| • Have you indicated your choice of degree/diploma and campus?  | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |
| • Have you enclosed the proof of payment or non-refundable application fee?                                     | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |
| • Have you enclosed all the required certified documentation:   |   |                          |                          |                          |                          |
| – Copy of ID Document/Passport  | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |
| – Academic Record (if studied previously)   | } <b>English translation if applicable</b>            | YES                      | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |
| – Degree Certificate (if studied previously)  |   | YES                      | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |
| – Senior Certificate/Matric Certificate/O/A Levels or relevant school leaving qualification/certificate         | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |
| – English Proficiency proof   | } <b>Compulsory for international applicants only</b> | YES                      | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |
| – Proof of HESA assessment  |   | YES                      | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |
| • Have you read and understood the medical insurance requirements (applicable to International Applicants only) | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |
| • Have you completed the residence section (10) if applicable?  | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |
| • Have you filled in the application form in full?  | YES   | <input type="checkbox"/> | NO                       | <input type="checkbox"/> |                          |

Applications and Information Office

[www.ukzn.ac.za](http://www.ukzn.ac.za)

March 2017