



Central University of
Technology, Free State

CENTRAL UNIVERSITY OF TECHNOLOGY, FREE STATE

**APPLICATION FOR CONTINUED STUDIES
CURRENT STUDENTS**

KINDLY ADDRESS ALL CORRESPONDENCE TO
ASSISTANT REGISTRAR: ACADEMIC STRUCTURE AND ENROLMENT SERVICES UNIT
CENTRAL UNIVERSITY OF TECHNOLOGY, FREE STATE
PRIVATE BAG X20539 BLOEMFONTEIN 9300
OR
P O BOX 1881 WELKOM 9460

Receipt number Receipt date Amount paid

THE PRESCRIBED APPLICATION FEES MUST ACCOMPANY EACH APPLICATION. THIS FEE WILL BE NON-REFUNDABLE ON CANCELLATION.
You must still register in person on the date as published. Your continuing admission is subject to selection.
Submit this completed application form to the above-mentioned address.

Student No. Academic year 20

ACADEMIC APPLICATION DETAILS

COURSE FOR WHICH YOU WISH TO ENROL

COURSE CODE

OFFERING TYPE

(MARK WITH AN X)

First Semester	<input type="checkbox"/>	1
Second semester	<input type="checkbox"/>	2
Year	<input type="checkbox"/>	Ø

Main Campus Day Classes	01	Experiential Training	08
Main Campus Evening Classes	02	Bloemfontein ECP	17
DISTANT CAMPUS:			
CUT Welkom-Campus Evening Classes	06	CUT Welkom Campus Day Classes	07
Vista Programmes Evening Classes	12	Vista Programmes Day Classes	13
Kimberley-Campus Evening Classes	04	Welkom ECP	16

FOR WHICH YEAR ARE YOU ENROLLING IN THIS COURSE?

1 2 3 4

HAVE YOU CHANGED YOUR COURSE? YES NO SO - APPLY FOR RECOGNITION/EXEMPTION OF SUBJECTS

PERSONAL PARTICULARS

01	Title (Mark with an X)
Mr	<input type="checkbox"/>
Ms	<input type="checkbox"/>
Prof.	<input type="checkbox"/>
Dr	<input type="checkbox"/>
Give abbreviation	<input type="text"/>
Other	<input type="text"/>

02 Surname

03 Initials

04 I.D. No.

05 E-mail address

Student No.

06	How is your general health?	Good	<input type="checkbox"/>
		Poor	<input type="checkbox"/>

07	Are you in any way disabled?	Yes	<input type="checkbox"/>
		No	<input type="checkbox"/>

08	If handicapped, furnish particulars	<input type="checkbox"/>
		<input type="text"/>

09	Which physical facilities are required by you to overcome your disability problem? Please furnish particulars.
	<input type="text"/>
	<input type="text"/>

10 ADDRESS DETAILS

If your address has changed, please complete an LS149 change of address form at Student Enrolment Services.

DECLARATION

Student Number

DECLARATION BY STUDENT

I, the undersigned _____ (full names and surname)

_____ (ID number), assisted by _____ (full names and surname of parent/guardian)

1. Declare

- 1.1 that prior to the date of enrolment, I will familiarise myself with the contents of all student rules and regulations (as contained in the Calendar – Part I), as well as all Central University of Technology, Free State (CUT) policies and procedures relating to students;
 - 1.2 that for the duration of my studies at the CUT I commit myself to compliance with all rules, regulations, policies and procedures the CUT Council or any authorised body or person may announce or amend from time to time, with said rules, regulations, policies and procedures forming part of my agreement with the CUT;
 - 1.3 that I am completing and signing this declaration and application for admission with the full knowledge and permission of my parent/guardian;
 - 1.4 that all particulars as provided to the CUT are true and correct, failing which my registration will be cancelled with immediate and automatic effect; and that I have authorised the CUT and its duly authorised verification agents to forward my personal information, as well as any information that I have provided in support of my application, to the suppliers of verification information for the purpose of verifying my personal credentials and records, included but not limited to qualification verification, credit record status and criminal verifications
 - 1.5 that the agreement arising from the signing of this application, notwithstanding the place of signing, is deemed to have been concluded in Bloemfontein, provided that this application only becomes a valid and binding agreement upon my official enrolment at the main campus in Bloemfontein. Proof of the latter is available from the Unit: Academic Structure and Student Enrolment Services;
 - 1.6 that I will immediately notify the Unit: Academic Structure and Student Enrolment Services in writing of any change of address;
 - 1.7 that, in terms of the Promotion of Access to Information Act, Act No 2 of 2000 I herewith grant permission to the CUT to disclose my personal information to third parties, as deemed necessary by the CUT;
 - 1.8 that I grant permission to the CUT to submit progress reports, counselling information and other applicable information related to my studies / activities and/or counselling at the CUT, to my parents and/or guardians and/or sponsors or donors; and
 - 1.9 that I am not aware of any potential conflicts of interests that could arise if I was to be successful in my application to study at the CUT. Should any such potential conflicts of interests arise, I will immediately, in writing, inform the CUT thereof.
 - 1.10 that I, the undersigned, hereby acknowledge that my registration and participation in any studies at the cut is voluntary and also acknowledge that such participation may (depending on the programme for which I register) include, but not be limited to, research, practical evaluation, laboratory and other experiments, exposure to hazardous substances, exposure to machinery and equipment, field trips, travelling on and off campus, participation in tours and travelling during the course of such tours, and accommodation and use of buildings and facilities of the cut or third parties ("related activities"). I furthermore acknowledge that I am aware that there are known and unknown risks and dangers inherent in my participation in the programme and its related activities for which I choose to register and that I understand that these risks may result in potential loss or damage to property or property in my possession or under my control and/or my personal injury or death, resulting not only from my own actions, omissions or negligence, but also from the actions, omissions and negligence of others or from the condition of buildings, facilities, defective equipment, vehicles, procures, consumables or substances which I interact with, utilize or reside in.
2. I hereby renounce any possible action against the cut and indemnify the cut from any claim that may arise from the following:
- 2.1 any loss of or damage to property, movable or immovable, including any consequential damage directly arising from damage to such property;
 - 2.2 any injury, illness or death;
 - 2.3 any event, incident or accident;
 - 2.4 any legal costs or expenses relating to claims or lawsuits arising from the specified incidents; and
 - 2.5 any costs incurred for medical treatment;
where such loss, damage, illness, injury, death, event or incident arises from my participation in any voluntary activity or action which is not a pre-requisite for my studies and/or for the obtaining of the qualification for which i am registered at the cut.; and
 - 2.6 any liability that may result from furnishing verification information from and to the cut and its duly authorised verification agents, including but not limited to the various educational institutions, the saps and the relevant credit bureaus
3. I accept that I participate in the activities mentioned in paragraph 2 at my own risk and I voluntarily accept all risks associated therewith.
4. Irrespective of any bursary or loan that has been received or is to be received, I hereby accept liability/accountability, as the responsible person, for the prompt and punctual payment of all tuition, class, residence and other fees, of whatever nature, owed to the CUT.
5. I hereby accept and confirm that I will not occupy any residence of the CUT before all minimum claimable fees have been paid.
6. I hereby accept and confirm that I will not attend any classes of the CUT before the minimum claimable fees have been paid, provided that no student will be considered for registration before all minimum fees have been paid and all outstanding payments arising from previous commitments have been settled.
7. I hereby accept liability/accountability for the payment of all legal fees of the CUT, including attorneys' and client fees, as well as collection fees, if I should fail to honour any of my commitments with respect to payments.
8. I hereby cede all rights to which I am or may be entitled to discharge any amounts due by the CUT as aforesaid against the facility contemplated on page 4 hereof.
9. I am aware of the fact that my enrolment is only valid if it complies with the regulations of the programme concerned, notwithstanding acceptance of this application by the CUT.
10. If this application is accepted, it will constitute part of the contract with the CUT.
11. I hereby undertake to respect the provisions of the Copyright Act and I indemnify the CUT from any claims that may arise from allegations of copyright violation by me as student. I furthermore undertake to purchase all original works, as required for my studies, from my personal funds, and I accept that the CUT is not responsible for providing original works, copies of original works, or copyright licences on original works.

SIGNED AT _____ ON THIS _____ DAY OF _____ 20_____.

SIGNATURE OF STUDENT: _____

NB: All student rules, regulations, policies and procedures are available upon request from the Unit: Academic Structure and Student Enrolment Services and are also available for perusal at the Library & Information Centre.

DECLARATION

Student Number									
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DECLARATION BY PARENT/GUARDIAN

I, the undersigned _____ (full names and surname of parent/guardian)

_____ (ID number)

1. Declare
 - 1.1 that I have verified the information contained in the above form and that the particulars contained therein are true and correct;
 - 1.2 that I have familiarised myself with the contents of the declaration given by my son/daughter and have given my permission for the concluding of the specified and consequent agreement with the CUT, entered into by my minor son/daughter;
 - 1.3 that I am aware of the fact that there are student rules, regulations, policies and procedures in existence that have been promulgated by the CUT Council or another authorised body or person. I confirm that I am aware that the Council or other authorised body or person may from time to time promulgate additional student rules, regulations, policies and procedures and I agree that my son/daughter must commit himself/herself to compliance with such;
 - 1.4 that I will immediately notify the Unit: Academic Structure and Student Enrolment Services in writing of any change of address;
 - 1.5 that my son/daughter may enter into any bursary and/or loan agreement, as well as any amendment thereof, with the CUT;
 - 1.6 that, in terms of the Promotion of Access to Information Act, Act No 2 of 2000 I herewith grant permission to the CUT to disclose my son's/daughter's personal information to third parties, as deemed necessary by the CUT; and
 - 1.7 that I grant permission to the CUT to submit progress reports, counselling information and other applicable information related to my son's/daughter's studies / activities and/or counselling at the CUT to his/her sponsors and/or donors.
 - 1.8 that I, the undersigned, hereby acknowledge that the registration and participation of my son/daughter in any studies at the cut is voluntary and also acknowledge that such participation may (depending on the programme for which he/she registers) include, but not be limited to, research, practical evaluation, laboratory and other experiments, exposure to hazardous substances, exposure to machinery and equipment, field trips, travelling on and off campus, participation in tours and travelling during the course of such tours, and accommodation and use of buildings and facilities of the cut or third parties ("related activities"). I furthermore acknowledge that I am aware that there are known and unknown risks and dangers inherent in his/her participation in the programme and its related activities for which he/she chooses to register and that I understand that these risks may result in potential loss or damage to property or property in his/her possession or under his/her control and/or his/her personal injury or death, resulting not only from the actions, omissions or negligence of my son/daughter, but also from the actions, omissions and negligence of others or from the condition of buildings, facilities, defective equipment, vehicles, procures, consumables or substances which he/she interacts with, utilizes or resides in.
2. I hereby renounce any possible action against the cut and indemnify the cut from any claim that may arise from the following:
 - 2.1 any loss of or damage to property, movable or immovable, including any consequential damage directly arising from damage to such property;
 - 2.2 any injury, illness or death;
 - 2.3 any event, incident or accident;
 - 2.4 any legal costs or expenses relating to claims or lawsuits arising from the specified incidents; and
 - 2.5 any costs incurred for medical treatment;
where such loss, damage, illness, injury, death, event or incident arises from my son's/daughter's participation in any voluntary activity or action which is not a pre-requisite for my son's/daughter's studies and/or for the obtaining of the qualification for which my son/daughter is registered at the cut; and
 - 2.6 any liability that may result from furnishing verification information from and to the cut and its duly authorised verification agents.
3. I accept that my son/daughter participates in the above activities at his/her own risk and that he/she voluntarily accepts the risks associated therewith.
4. I hereby agree that the agreement arising from the signing of this document, notwithstanding the place of signing, is deemed to have been concluded in Bloemfontein; provided that this application only becomes a valid and binding agreement upon the applicant's official enrolment at the main campus in Bloemfontein. Proof of the latter is available from the Unit: Academic Structure and Student Enrolment Services.

SIGNED AT _____ ON THIS _____ DAY OF _____ 20 _____.

SIGNATURE OF PARENT/GUARDIAN: _____