



## ENROLMENT FORM

Student Number													
Surname			Initials			Title		Mr		Mrs		Ms	Miss
Name						Gender			Male		Female		
Marital status			Single		Married		Divorced		Separated			Widowed	
ID/Passport						Citizenship							
Employment			Employed			Unemployed			Volunteer				
Ethnic group			Black		Coloured		White		Indian		Other		
Mother tongue	Afrikaans		English		Ndebele		Xhosa		Zulu		Pedi		
tongue	Tsonga		Tswana		Sotho		Venda		Swati		Other		

Tel (H)			Cell		
Tel (w)			Fax		
Email					
Next of Kin		Surname		Name	
Tel (H)					
Tel (W)					
Email					

Physical address			Postal address		
Code			Code		

Disability	None	Hearing	Physical	Sight	Speech	Other
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Previous academic record							
Work experience							
Computer Literacy		Illiterate		Fairly literate		Highly literate	

