Registration: Student Details

Student Number:

Completed this date:

Personal:

Are you also a Tutor?

Title: _____ Yes ☐

Initials: _____ Are you French? ☐

Preferred Name: _____

First Names: _____

Last Name: _____

ID No: (Provide photocopy of ID for TC file)

Date of Birth: Day Month Year

Photo: (Black & white or colour, normal 38x38mm)

Attach photo here please

This page must be on file at the responsible Tuition Centre. The TC admin will be responsible to update all marks.

This form must be on file as a student document of proof to maintain a complete learner portfolio and to regulate the supply of curriculum.

Calv Univ. Student Number:

Date Reg. with CU: Day/Mo/Yr

Provide above if you have a Calvary University student number.

Address:

We will send post to this first address:

Postal address: _____

_____

_____

Country: _____

Physical address: _____

_____

_____

Tutor:

Who will act as your Tutor?

Name: _____

Your tutor must register on the same kind of form.

Contact:

Work No: _____

Fax No: _____

Cell Phone: _____

Home No: _____

e-mail: _____

Highest previous qualification: Transfer Credits

_____

e.g. Matric or Diploma. State also place and date. Provide copy of diploma

Programme enrolling for:

Certi, Dip. etc. in ...

Prog: _____ Programme Code

Specialization: _____ (If any)

Subjects:

Graduate at: CLT ☐ CUniv ☐ Other ☐

1 ..... State course names, or description, or RPL (if any)

2 .....

3 .....

4 .....

5 .....

6 .....

7 .....

Praxis ..... Final Mark

Tuition Centre: _____ This area for student marks

AGREEMENT

I understand and accept the conditions of training at Calvary University as set out in the Student Agreement. I will abide by these rules and regulations which safeguard the ideals of discipleship and the moral atmosphere.

I will be an example of good Christian character and conduct at all times and places while I am enrolled as a student.

I hereby **indemnify** my Tutor and Calvary from any claims of compensation (outside of undue fees paid) that may occur during my studies.

Signature: _____

The original of this completed document must be faxed under letter cover to **Calvary** to apply for the **certificate** or **qualification**.