



APPLICATION FOR ADMISSION

Applications may be submitted: Online: www.hugenate.com
E-mail: applications@hugenate.com
Post: PO Box 16, Wellington, 7654
In Person: 1 College Street, Wellington, 7655

No application will be considered if the application and/or supporting documents are incomplete or illegible. Please see the checklist at the end of the application form to ensure that you have attached all supporting documents.

A non-refundable application fee of **R150.00** is payable for all applications.

Banking Details: Account Name: Hugenate Kollege NPC
Bank: Nedbank
Account Number: 1156 056 861
Branch Code: 198765
Swift Code: NEDS ZA JJ
Reference: L followed by applicant's ID number

Please include proof of payment with your application or send it to: 086 240 6251 or studentaccounts@hugenate.com

Complete the entire form in the spaces provided. Where an option must be exercised, write an "X" in the appropriate box, unless otherwise instructed.

Please indicate what academic year you are applying for	2	0		
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PROGRAMME SELECTION

Familiarise yourself with the admission requirements of the programme of your choice prior to application and indicate your first and second choice of study by writing "1" and "2" next to the relevant choices in the space provided.

Programmes	
Bachelor of Social Work (NQF Level 8) (SAQA ID 105031)	
Bachelor of Theology in Missional Ministry (NQF Level 7) (Registration Pending) (Distance Learning)	
National Diploma: Early Childhood Development (NQF Level 5) (SAQA ID 64650)	
Occupational Certificate: Child and Youth Care Worker (NQF Level 5) (SAQA ID 99510)*	
Occupational Certificate: Social Auxiliary Worker (NQF Level 5) (SAQA ID 98890)*	
FET Certificate: Social Auxiliary Work (NQF Level 4) (SAQA ID 23993)* (Kimberley Only)	
FET Certificate: Community Development (NQF Level 4) (SAQA ID LP 76987)*	
FET Certificate: Theology and Ministry (NQF Level 4) (SAQA ID 49057)	
FET Certificate: Early Childhood Development (NQF Level 4) (SAQA ID 58761)*	
Other:	

Courses marked with an * will have an intake in the first and second semesters. Please indicate which semester you are applying for.	1 st Semester	2 nd Semester
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Please indicate the learning site you are applying for	Wellington	Kimberley
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PERSONAL DETAILS OF APPLICANT

Title	Mr	Ms	Mrs	Other:	Initials	
Surname						
First Name						
Second Name						
Third Name						
Date of Birth						
Gender	Male			Female		
Marital Status	Single	Married	Widow/er	Divorced		
Identity Number						
Passport Number						
Home Language						
Language of Correspondence	English			Afrikaans		
Email Address						
Phone Number						
Mobile Number						
Fax Number						
Residential Address						
	Postal Code					
Postal Address						
	Postal Code					
Local Municipality						
Area / District Municipality						
Province						

COLLEGE ACCOMMODATION

Do you require College Accommodation? (WELLINGTON ONLY)	Yes	No
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Please note that accommodation is subject to availability and approval by the selection committee. Indicating that you require accommodation does not guarantee placement.





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STUDENT SUPPORT

Do you have any disabilities or long term medical conditions that may affect your studies?	Yes	No
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If yes, please indicate the area of impairment:

Sight (even with glasses)		Hearing (even with hearing aid)	
Communication (talking, listening)		Physical (moving, standing, grasping)	
Intellectual (difficulties in learning)		Emotional (behavioural or psychological)	
Multiple		Disabled but unspecified	
Unknown disability status			

Please specify condition/s:	
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Do you have any medical condition/s or allergy/ies you need/want us to know about?

Name of medical aid scheme (if applicable)	
Medical aid number	
Name of main member	
ID Number of main member	

Please provide a copy of the medical aid card and ID of main member.

Should you not be a member of a medical aid scheme, you will be taken to the nearest provincial hospital in the case of an emergency and the account be sent to your parent / guardian.

Religious Affiliation (if applicable):		
Anglican		Apostolic Faith Mission (AGS)
Assemblies of God		Baptist
Church of Christ		Dutch Reformed Church (NG Kerk)
Dutch Reformed Church in Africa		Full Gospel
Hindu		Jehovah's Witness
Lutheran		Methodist
Muslim		Nazarene
New Apostolic Church		Old Apostolic Church
Other Protestant		Pentecostal Protestant
Presbyterian		Reformed Churches in South Africa
Roman Catholic		Uniting Reformed Church (VGK)
Zion Christian Church		Not Prepared to Divulge
Other:		



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SECONDARY EDUCATION

Please provide details and a copy of highest academic achievement / last official school report / Senior Certificate.

Year of Completion	
Name of School	
City	
Country	

TERTIARY EDUCATION

Please provide proof of previous tertiary education – (e.g. College, University, etc.)

Institutions	Courses / Qualifications	Year Completed

CITIZENSHIP AND RESIDENCY

*Please indicate your current citizenship status below. Ignore if you are a South African citizen.

Permanent Resident status		Temporary Entry Permit	
Applying for a Study Permit		Refugee status	
What country do you hold citizenship for?			

STATISTICAL INFORMATION

Please note that this question is asked to allow the institution and the Government to track progress in the transformation of tertiary education.

Ethnic Group*									
African		Coloured		Indian / Asian		White		Other	

Socio Economic Status			
Unspecified		Employed	
Unemployed – looking for work		Not working – not looking for work	
Not working – housewife / homemaker		Not working – scholar / fulltime student	
Not working – pensioner / retired person		Not working – disabled person	
Not working – not wishing to work		Not working – none of the mentioned	





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CONTACT DETAILS OF NEXT OF KIN AND ADDITIONAL CONTACT

Title	Mr	Ms	Mrs	Other:	Initials	
First Name and Surname						
Language of Correspondence	English			Afrikaans		
Email Address						
Phone Number				Mobile Number		
Relationship to Applicant						

Title	Mr	Ms	Mrs	Other:	Initials	
First Name and Surname						
Language of Correspondence	English			Afrikaans		
Email Address						
Phone Number				Mobile Number		
Relationship to Applicant						

LEGAL UNDERTAKING

I, the undersigned declare that I:

- accept that incorrect or misleading information could lead to the cancellation of this application;
- together with the person indicated as the person responsible for the fees, will be jointly and severally responsible for the punctual payment of money due by virtue of this agreement with Hugenote Kollege;
- further undertake to pay all legal expenses of the College should I fail to meet any obligations in respect of the payments mentioned above;
- have acquainted myself, and will in future acquaint myself, with the contents of the rules, regulations, policies and any amendments thereof of the College as determined by the College;
- hereby indemnify the College against any claims arising from injuries that I may sustain and/or damage that I may suffer due to any event, injury, illness or death, resulting in whatever way, or consequential to my involvement with my theoretical, practical and workplace training or my participation in any tours, excursions or transportation during my period of study at the College; and that I participate in any of the abovementioned activities on my own responsibility and voluntarily accept the risk involved;
- am aware that my enrolment is valid only if it complies with the regulations governing the qualifications concerned, notwithstanding the acceptance of this enrolment by the College;
- accept that, if I abandon or change my qualification of study at any time, no cancellation or reduction of fees will be considered and that I will remain liable for the payment of all fees in full;
- authorize the College, should I urgently require medical treatment, to obtain appropriate medical treatment, and in the event of an emergency, I request the College to give the necessary instruction that an operation be performed on me, but only if the medical practitioner deems it essential and it does not seem possible to communicate with my parent(s) or legal guardian beforehand.

Signature of Applicant	
Date:	

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CONTACT DETAILS AND LEGAL UNDERTAKING OF PERSON / INSTITUTION RESPONSIBLE FOR PAYING THE COLLEGE

Person / Institution responsible for payment (e.g. self, parents, guardian, bursary, bank, etc.)	
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Please provide the contact details of the responsible person / institution below. Ignore if you are paying yourself.

Title	Mr	Ms	Mrs	Other:	Initials	
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Surname		
First Name		
Second Name		
Third Name		
Identity Number		
Passport Number		
Language of Correspondence	English	Afrikaans
Email Address		
Phone Number		
Mobile Number		
Residential Address		
	Postal Code	
Postal Address		
	Postal Code	
Where must the invoice and important information be sent to?	Email Address	Postal Address

We, the undersigned applicant and above mentioned party, hereby admit that we are jointly and severally responsible for any monies due at any stage to Huguenote Kollege in terms of this agreement.

Signature of Person Responsible for Fees	
Date:	

Signature of Applicant	
Date:	



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CHECKLIST

Please note that no incomplete applications will be considered. Before submitting your application, please check that you have done everything that applies to you, as shown in the list below.

We suggest that you tick the box next to each point when you have checked it.

	Have you completed all sections of the form that applies to you?
	Have you signed the “Legal Undertaking” declaring that the information given is complete and correct?
	Did you indicate that you require accommodation? (if applicable)
	Have you provided all the contact details in the form?
	Have you enclosed a certified copy of proof of your residential address? (See the guide to completing the application form for more information)
	Have you provided a certified copy of your Identity Document?
	Have you enclosed a certified copy of your highest qualification?
	Have you enclosed a certified copy of your marriage certificate / divorce documents (if applicable)?
	Have you enclosed a certified copy of the Identity Document of the person responsible for paying the student fees?
	Have you enclosed a certified copy of proof of the residential address of the person responsible for paying the College?
	Have you included a copy of your medical aid card? (if applicable)
	Have you included proof of payment of the application fee?

GUIDE TO COMPLETING THE APPLICATION FORM



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PLEASE READ THE FOLLOWING CAREFULLY BEFORE COMPLETING THIS APPLICATION FORM:

GENERAL

- This form must be completed by all prospective students applying to Hugenote Kollege and all required documents included with the application before it will be considered.
- The application form must be signed by the applicant and parent / legal guardian (if applicable).
- Hugenote Kollege reserves the right at its sole discretion, to cancel or amend any course or module initially advertised and offered, on the basis of insufficient demand or where available facilities and infrastructure have reached maximum capacity. In the case where a course or module has reached its maximum capacity, prospective students will be allowed to register for an alternative course depending on the availability of that course.
- Hugenote Kollege offers Seta, QCTO and Council on Higher Education accredited courses complying with the standards of the South African Qualification Authority (SAQA). Seta accredited courses are presented during a minimum period of twelve (12) months. The intern theoretical and workplace components of the courses presented by the College staff are followed by an external verification process conducted by the relevant Seta who is then also responsible for the issuing of the certificates to competent students. The Hugenote Kollege has no control over the timeframe of the external Seta processes and the issuing of certificates.

ADMISSION REQUIREMENTS

- Please refer to the relevant Hugenote Kollege information sheets for information on admission requirements.
- All candidates who comply with the minimum requirements are still subjected to selection processes.
- Hugenote Kollege offers the opportunity to individuals to apply for admission to the College based on Recognition of Prior Learning (RPL).

SUPPORTING DOCUMENTS TO BE SUBMITTED WITH YOUR APPLICATION FORM

- One certified copy of each of:
 - Applicant's Identity Document*
 - Highest qualification*
 - Marriage/divorce certificate (if applicable)*
 - Proof of residential address of Applicant. An affidavit by your parent(s), guardian(s), partner, spouse or landlord confirming that you are residing at their residence, along with proof of their address, will be accepted.
 - Identity Document of the person responsible for the student fees
 - Proof of residential address of the person responsible for the fees
- Should the name and/or date of birth on the Senior Certificate or equivalent qualification differ from the name on the application form or Identity Document, proof must be provided to explain the change in name. If proof of differences in name and or date is not provided, this will disqualify the application.
- Copy of your medical aid card (if applicable).
- Proof of payment of the application fee.

***PLEASE NOTE:** Should the application be successful the student will be expected to submit three (3) additional certified copies of the supporting documents at registration.



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INTERNATIONAL PROSPECTIVE STUDENTS (NON SOUTH AFRICAN CITIZENS)

- Additional to the documents stated above, four (4) certified copies of your passport must accompany this form. You are required to produce a valid study permit before you will be permitted to register.
- Non-RSA qualifications: The onus rests with all international applicants to have their school qualifications evaluated by SAQA before submitting this application form. SAQA can be contacted at: Postnet Suite 248, Private Bag, Waterkloof, 0145. Tel. +27 12 431 5000 / +27 86 010 3188.
- School-leaving certificate (with English translation where necessary).

PROGRAMME COSTS

- Please refer to the Huguenote Kollege information sheets for information on programme costs.
- Should you still wish to apply for a bursary or are waiting feedback on a bursary application, please indicate yourself as the person responsible for payment of the fees, as the student always remains liable for the fees should the person responsible for the fees neglect to pay.

CHANGE OF ADDRESS AND CONTACT DETAILS

- The College must be notified immediately of any change of contact number, email or address (postal or physical) after submission of the form.

LANGUAGE POLICY

- In conducting its business, the College shall use two languages, namely Afrikaans and English.
- Tuition programmes can be presented either in Afrikaans or in English or in both these languages of tuition, provided that there is a demand for instruction in the language(s) concerned and that such programmes are academically and economically justifiable.
- Afrikaans and English are to be used and developed as academic languages in order to achieve excellence in academic communication.
- All students are entitled to be assessed in either Afrikaans or English. Students enrolled for professional qualifications may however be required from time to time to complete a task or tasks in a particular language as part of their professional training.

ACKNOWLEDGEMENT OF APPLICATION

- Should receipt of your application form not be acknowledged within four weeks of posting/submission, enquiries must be made at the department of Student Administration of Huguenote Kollege.

CANCELLATION OF APPLICATION

- The College must be notified immediately if the application is cancelled or changed prior to registration.

SEPARATE LETTERS

- You will be notified of the outcome of your academic and accommodation application in separate correspondence.

