

Please indicate any physical disability (tick, where appropriate)

This information will not disadvantage your application

A	Diabetic	B	Blind	C	Cerebral Palsy
D	Deafness	E	Behavioral/Psychological	H	Partial Hearing
I	Partially sighted	L	Intellectual (Learning Difficulty)	P	Paraplegic
Q	Quadriplegic	S	Speech Defect	T	Communication (Talking/Listening)
W	Wheelchair	Y	Dyslexia	Z	Physical (Moving/Standing/Grasping)
U	Unspecified	M	More than one disability		

Please give us some details of your disability _____

PROPOSED REGISTRATION

Full-time/Part-time: _____ CHOICES OF COURSES (eg. Certificate in agriculture, Solar Installations) First course choice: _____ Second course choice: _____

PREVIOUS STUDIES

Have you previously been enrolled at a Institute/higher education institution (other than MTU)?

Please ✓ where relevant

Yes	No
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If “YES”, please complete the following:

(Please provide a full transcript academic record & certificates of conduct from all institutions attended.

NB: A transcript is a document setting out your full academic record from the institution. The transcript is different to a statement of results. Please ensure that you provide a full Academic Transcript - which includes FINAL results).

YEAR	INSTITUTION	QUALIFICATION	WAS IT COMPLETED? YES or NO	STUDENT NUMBER AT THAT INSTITUTION

Please give a short explanation of why you wish to transfer to Kalahari Technical Institute of Namibia

ADDRESS DETAILS

HOME POSTAL ADDRESS:		CELLPHONE NUMBER:	
_____		_____	

REGION:	_____	E-MAIL:	_____
GUARDIAN/PARENT NAME AND SURNAME		OCCUPATION	
_____		_____	

GUARDIAN OR PARENTS ADDRESS:		TELEPHONE NUMBER:	
_____		_____	

_____	POSTAL CODE	CELL:	_____
_____	_____	E-MAIL:	_____
REGION	_____		

TO BE COMPLETED BY PRESENT LEARNERS CURRENTLY AT SCHOOL

Final school year: 20 _____

Number of years spent at this school: _____

Examining Board: _____

Examination number: (if known) _____

Name of your School: _____

**VERY IMPORTANT!!
EXAMINATION RESULTS**

PLEASE ONLY COMPLETE THE SECTION RELEVANT TO YOUR SCHOOLING.

Please **DO NOT** use correction fluid on examination results. If you do make a mistake and need to use correction fluid please ask your school to verify the correction.

If you have already completed your schooling, please attach a certified copy of your school certificate to this application. If you have not yet completed your schooling please provide the results of your most recent examinations.

NAMIBIAN NATIONAL SENIOR CERTIFICATE APPLICANTS (*Any learner completing grade 12*) - please complete this section only

Which results are you providing? Grade 11 /10 (JSC) <input style="width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/>	Grade 12 Exam Results <input style="width: 50px; height: 25px; border: 1px solid black;" type="checkbox"/>
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Subject	Symbol	Subject	Symbol
eg. English 1st Language	D	eg. Math	D
1.		5.	
2.		6.	
3.		7.	
4.		8.	
5.		9.	

FOREIGN QUALIFICATION APPLICANTS - please complete this section only

Students doing A-levels/AS levels should enter their mock A-level/AS levels results and supply a certified copy of their O-Level results.

Students doing HIGSCE or IB examinations should enter their mock results and where relevant supply certified copies of their IGSCCE results.

Subject	Grade/Level	Symbol	Subject	Grade/Level	Symbol
eg. English 1st Language	AS-level	D	eg. Accounting	A-level	C
1.			5.		
2.			6.		
3.			7.		
4.			8.		
5.			9.		

NB: DO NOT FORGET TO SIGN THIS DECLARATION

DECLARATION AND AGREEMENT

I/We, the undersigned, hereby declare that:

To the best of our knowledge and belief the information furnished in this application is true and correct and that if it be found to be false, and misleading in any respect, this application may be invalidated and the applicant's registration terminated; and further agree:

That I/We accept liability for damage to Institute property howsoever caused by the Applicant and indemnify the Institute against any loss or damage howsoever caused in respect of property left at the Institute by the Applicant. I/We also indemnify the Institute against any claim whatsoever for damages howsoever caused or arising which the Applicant may sustain whilst registered as a student at the Institute, acknowledging that the Applicant's participation in any sporting or other activity at the Institute or conveyance of the Applicant in any Institute vehicle, shall be at the Applicant's sole and absolute risk. This indemnity shall be binding on the Applicant's Executors and Heirs:

That I/We acknowledge that a Minimum Initial Payment (MIP) is required by a set date each year, including the first year of study, unless satisfactory arrangements have been made with the Institute. Details of the MIP amount will be included in future correspondence with the applicant:

That a statement signed by the Director (Finance) shall represent the amount owing to the Institute by me/us, and further that in the event of such amount being handed over for collection I/We shall pay all legal charges incurred on the attorney and client scale:

That I/We will pay interest on all overdue fees, and disbursements at the rate of 2% per month compounded monthly and calculated from the first day of each month following the date by which final payment of all fees and disbursements must have been made:

That I/We shall abide by all regulations of the Institute - and further that the Applicant shall, if accepted, be under the disciplinary control of the Institute as from the date on which he/she takes up residence at the Institute or the day on which he/she commences studies or attends an orientation week or summer school or similar function or registers as a student, whichever is earliest, until the Institute accepts a notice of withdrawal from me/us or the Applicant fails to renew his/her registration on the due date, whichever is the later:

That I/We accept and understand that the Institute keeps documents, including this Declaration and Agreement, electronically and distributes them as such. The Institute shall at all times be entitled to utilize such documents in electronic format for whatever purpose required and I/We agree that the electronically generated documents shall replace the originals signed by me:

That the Institute may in its discretion report to the parent or guardian or major fee contributor such breaches of the rules by the Applicant as the Institute deems necessary and further to report on any matter concerning progress, conduct, well-being or health of the applicant, and further that the Institute may take all such steps as it considers reasonable in the event of the Applicant becoming ill or requiring medical attention.

That although the Institute does not take any responsibility for informing parents or guardian or major fee contributor of disciplinary action against a student (whether pending or finalized), academic performance or any other matters relating to the student, the Institute may in its discretion report to the parent or guardian or major fee contributor such breaches of the rules by the applicant as the Institute deems necessary and further to report on any matter concerning progress, conduct, well-being or health of the Applicant, and that the Institute may take all such steps as it considers reasonable in the event of the Applicant becoming ill or requiring medical attention without the Institute undertaking any legal obligation to do so.

Signature of applicant:

Signature of guardian/parent:

Signature of person responsible for fees:

Date:

CHECK LIST

A. Have you enclosed with your application form?

Proof of Direct Deposit of application fee of N\$150.
DO NOT ENCLOSE CASH

Certified copy of your matriculation certificate (post-matriculants only), O/AS/A-level certificate or IGSCCE/HIGSCCE results.

B. Has your form been signed?

C. Have you inserted your certified copy identity

Bank: First National Bank Account
Name: Kalahari Technical Institute of Namibia
Account Number: 64288261040
Branch Code: 281872

RETURN THIS FORM TO:

THE REGISTRAR,
Kalahari Technical Institute
P.O. Box 86638
ERF 1221 WEST INDUSTRY
OKAHANDJA, NAMIBIA

REFER TO THE BROCHURE FOR FURTHER INFORMATION

OFFICE USE ONLY

	DATE	SIGN
1. Captured		
2. Form Checked		