



St Augustine College of South Africa

UNDERGRADUATE DEGREE

Application Form

2021

PLEASE READ THE CONTENT OF THIS APPLICATION FORM CAREFULLY BEFORE SUBMITTING.

If necessary, please consult the current annual PROSPECTUS (available on the St Augustine website).

Non-refundable Application Fee:
R 100

This application will not be processed unless accompanied by the following:

- Certified copy of Applicant's Identity Document / Passport.
- Certified copy of matriculation or school-leaving certificate. (This certificate must clearly state that the application has an exemption to study for a bachelor degree – not a diploma, nor a certificate.)
- For Applicants who obtained a school-leaving certificate from outside of South Africa, a Universities SA Matriculation Board Exemption Certificate for degree study in South Africa (<http://mbit-apply.usaf.ac.za/applicant/add>; tel +27 (0) 10 591 4401/2; eMail Applications@USAf.ac.za).
- Certified copies of any other academic transcripts (degrees and qualifications already completed).
- Proof of payment of the non-refundable application fee.
(Proof of payment should be emailed to: undergraduate@staugustine.ac.za; deposit reference: UG + SURNAME + Initials.)

St Augustine's Banking Details:

Bank: Standard Bank of South Africa

Acc Name: St Augustine College of SA

Branch Name (Code): Northcliff (05 10 01)

Acc Number: 02 251 79 28

APPLICANT'S PERSONAL DETAILS

Title	Mr	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Other	<input type="text"/>
Surname	<input type="text"/>									
First Name/s	<input type="text"/>									
Maiden Name	<input type="text"/>									
Last Name on Matriculation Certificate (if applicable)	<input type="text"/>									

If the Applicant is a South African citizen or permanent resident, please provide the following:

South African Identity Number

If the Applicant is a citizen or permanent resident of a country other than South Africa, please provide the following:

Country

Passport Number

Does the Applicant need a study permit? Yes ☐ No ☐ If yes, has it been granted? ☐

If granted, valid from (dd/mm/yy): to

For statistical purposes, please provide the following:

Sex Male ☐ Female ☐ Home Language

Religious Affiliation

Population Group

Disability (if any)

How / where did you learn
about St Augustine
College?**PROGRAMME OF STUDY**

Please indicate with a cross, which undergraduate degree the Applicant is applying for:

Bachelor of Arts (BA)☐**Bachelor of Arts (BA) Extended**☐**Bachelor of Theology (BTh) Full-Time**☐**Bachelor of Theology (BTh) Part-Time**☐

NB All Theology lectures are offered during the week in the evenings (17h00 – 21h00); Part-Time students simply register for fewer modules each semester.

Intake (commencement date) for which applying

January

☐

July

☐**Fees Payable**

Please note that St Augustine reserves the right not to offer a particular degree programme in any academic year.

APPLICANT'S CONTACT DETAILS

Home (Street) Address

Postal Address
(if different to Home
Address)

Mobile / 'Phone Number

eMail Address

PARENT / GUARDIAN CONTACT DETAILS (compulsory if applicant is under 21)

This section MUST be completed if the Applicant is under 21 years of age.

Relationship to Applicant

Title

Mr

☐

Miss

☐

Ms

☐

Mrs

☐

Other

Surname

First Name/s

If he / she is a South African citizen or permanent resident, please provide the following:

South African Identity Number

If he / she is a citizen or permanent resident of a country other than South Africa, please provide the following:

Country

Passport Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home (Street) Address	<input type="text"/>														
	<input type="text"/>										Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal Address (if different to Home Address)	<input type="text"/>														
	<input type="text"/>														
	<input type="text"/>										Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile / 'Phone Number	<input type="text"/>														
eMail Address	<input type="text"/>														

FEE PAYER INFORMATION

This section MUST be completed if the Applicant is not the fee payer.

Relationship to Applicant	<input type="text"/>														
Title	Mr	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Other	<input type="text"/>					
Surname	<input type="text"/>														
First Name/s	<input type="text"/>														

If he / she is a South African citizen or permanent resident, please provide the following:

South African Identity Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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If he / she is a citizen or permanent resident of a country other than South Africa, please provide the following:

Country	<input type="text"/>														
Passport Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>														
Home (Street) Address	<input type="text"/>														
	<input type="text"/>										Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal Address (if different to Home Address)	<input type="text"/>														
	<input type="text"/>														
	<input type="text"/>										Postal Code	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile / 'Phone Number	<input type="text"/>														
eMail Address	<input type="text"/>														

FINANCIAL ASSISTANCE

Does the Applicant intend to apply for a St Augustine administered Bursary?

<input type="text"/>

SECONDARY SCHOOL-LEAVING EXAMINATION DETAILS

To be completed by the Applicant who is writing / has written a South African school-leaving certificate. (For Applicants who obtained a school-leaving certificate from outside of South Africa, a Universities SA Matriculation Board Exemption Certificate for degree study in South Africa must be obtained (<http://mbit-apply.usaf.ac.za/applicant/add>; tel +27 (0) 10 591 4401/2; eMail Applications@USAf.ac.za.)

Has Applicant written the Matriculation examination?

Yes

7

No

7

If yes,
when?

School name

School Address

Examination Written / to be Written

NSC

11

IEB

11

Other

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Matriculation subjects and marks (if writing the Matriculation Examination this year, please provide your grade 11 results)

Subject		%	Subject		%
1			2		
3			4		
5			6		
7			8		

NB If the Applicant has written his / her matriculation examination, he / she must provide a certified copy of the examination certificate; if not, the applicant must provide a copy of the latest school report and must submit the examination certificate as soon as it becomes available.

TERTIARY EDUCATION DETAILS

If the Applicant has completed any tertiary education or is currently registered at a tertiary institution, the Applicant must complete this section. Please enclose original transcripts or certified copies of certificates / result statements / academic transcripts.

Qualification	Year of Registration	Tertiary Institution	Year of Completion

MOTIVATION

The Applicant should provide a one-page motivation explaining why he / she wishes to study at St Augustine; the motivation should include mention of the subjects for which the Applicant intends to register and some information about the applicant (personal circumstances and future goals).

[illegible]

Without prejudice to the terms of my application for admission to St Augustine, I make the following declarations:

- 1 I will abide by the rules of St Augustine.
- 2 I will hold myself responsible for: the payment of all fees and charges due and payable by me to St Augustine each year; any arrears and interest on arrears; and any costs of recovery, including attorney-and-client scale fees and / or collection commission. If I do not inform the Registrar in writing of withdrawal from studies or a course by the prescribed date/s, I will be liable for full fees even if I do not make use of the facilities of St Augustine.
- 3 In the event of there being any fees outstanding, I acknowledge that St Augustine may withhold any and all of my academic results until such time as the outstanding fees have been paid.
- 4 I accept, agree and understand that: St Augustine may keep and process data and documents in electronic format, including the personal data supplied by me in my application form; St Augustine may use and transfer such data and use such documents in electronic or other formats for purposes consistent with St Augustine's relationship with me as a student and former student, including submission of data for the National Leavers' Record Database and other returns required by the Department of Higher Education and Training; that St Augustine places records of qualifications awarded in the public domain; that St Augustine may process my personal information in accordance with rules and policies for academic and administrative purposes, including disciplinary processes and that St Augustine may use electronically generated documents in place of the originals signed by me.
- 5 I waive all claims against St Augustine for: any damage or loss suffered while I am, or as a consequence of my being, a student at St Augustine and / or arising out of loss or destruction of, or damage to, any property belonging to me or any other person.
- 6 I have not been expelled, rusticated, or excluded from any other University or College.

7 If I am a minor, I have the consent of my parent / guardian to sign this form.

8 The information given on this form is complete and accurate

Signature of Applicant

Date

Declaration and Suretyship by Parent / Legal Guardian / Next-of-Kin

If the Applicant is under 18, his / her parent / guardian must make this declaration. If the Applicant is 18 or older, and his / her legal guardian will be paying the Applicant's fees, the parent / guardian must make this declaration. If the Applicant does not have a parent or a legal guardian, a responsible adult family member (next-of-kin) or other responsible adult who is prepared to make this declaration and the undertaking, must sign this Declaration and Suretyship.

Relationship to Applicant

Title

Mr

Miss

Ms

Mrs

Other

Surname

First Name/s

If he / she is a South African citizen or permanent resident, please provide the following:

South African Identity Number

If he / she is a citizen or permanent resident of a country other than South Africa, please provide the following:

Country

Passport Number

Home (Street) Address

Postal Code

Postal Address
(if different to Home
Address)

Postal Code

Mobile / 'Phone Number

eMail Address

I agree and consent to the above declaration, undertakings, waiver and indemnity by the Applicant. I consent to the Applicant signing registration forms if admitted. I hold myself jointly and severally liable with the Applicant as co-debtor for all amounts due by the Applicant to St Augustine, until I notify St Augustine to the contrary, in which event such cancellation shall take effect only from the beginning of the following academic year. I consent to St Augustine holding and processing personal information supplied by me in this application form (including any application for a St Augustine administered bursary) for purposes related to this application.

Signature of Parent / Legal
Guardian / Next-of-Kin

Date

Submit completed Application Form, together with all supporting documentation,

by eMail to:

undergraduate@staugustine.ac.za

Tel: 011 380 9000

Thank you for your Application. We will soon be in touch with a response.