



# St Augustine College of South Africa

## HIGHER CERTIFICATE

### 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 500**

For those applying for the first time, 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 diploma or a certificate.)
- For Applicants who obtained a school-leaving certificate from outside of South Africa, a Universities SA Matriculation Board Exemption Certificate for certificate 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 degrees and academic transcripts (degrees and qualifications already completed).
- Proof of payment of the non-refundable application fee.  
(Proof of payment should be emailed to: [highercertificate@staugustine.ac.za](mailto:highercertificate@staugustine.ac.za); deposit reference: HC + 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

For statistical purposes, please provide the following:

Sex Male ☐ Female ☐ Home Language

Religious Affiliation

Population Group

How / where did you learn  
about St Augustine  
College?

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## PROGRAMME OF STUDY

Please indicate with a cross:

**Higher Certificate in Biblical Studies (HCBS)**

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Please note that if a student attains less than 40% for the first two modules (HCBS 101 and / or HCBS 102), that student MAY not be allowed to continue with the programme.

## APPLICANT'S CONTACT DETAILS

Home (Street) Address

						Postal Code				

Postal Address (if  
different to Home  
Address)

						Postal Code				

Mobile / 'Phone Number

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eMail Address

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## FEE PAYER INFORMATION

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

Relationship to Applicant

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Title

Mr

	Miss		Ms		Mrs		Other			
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Surname

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First Name/s

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

South African Identity Number

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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

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Passport Number

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Home (Street) Address

						Postal Code				

Postal Address (if  
different to Home  
Address)

						Postal Code				

Mobile / 'Phone Number

eMail Address

**SECONDARY SCHOOL-LEAVING EXAMINATION DETAILS**

Date of Matriculation

School name

NB The Applicant must provide a certified copy of the South African matriculation examination certificate.

(For Applicants who obtained a school-leaving certificate from outside of South Africa, a Universities SA Matriculation Board Exemption Certificate for certificate or diploma study in South Africa (<http://mbit-apply.usaf.ac.za/applicant/add>; tel +27 (0) 10 591 4401/2; eMail [Applications@USAf.ac.za](mailto:Applications@USAf.ac.za)).

**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

**DECLARATION BY APPLICANT**

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 Learners' 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

**Submit completed Application Form, together with all supporting documentation,**

**by eMail to: [highercertificate@staugustine.ac.za](mailto:highercertificate@staugustine.ac.za)**

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