Western Cape Government
Agriculture

Application for admission

Diploma in

Agriculture/Extension/Cellar Technology

Head: Student Affairs
Elsenburg Agricultural Training Institute
PO Box 54
ELSENBURG
7607
Tel: +27 21 808 5451 Fax: +27 21 884 4319

www.elsenburg.com

FOR OFFICE USE ONLY

Student number

Receipt number

Sub-Programme: Higher Education & Training

Elsenburg Agricultural Training Institute

GENERAL RULES

1. Please complete the application form in ink.
2. Write in the blocks only, one letter per block. Always start in the first block.
3. Where choices have to be made, mark the appropriate block with an X.
4. Only applications submitted on the prescribed application form will be considered. No tippex must be used on the application form and **no faxed/e-mailed application forms will be accepted**.

CLOSING DATES

1. 31 October for Diploma in Agriculture, Cellar Technology and Extension

A. APPLICATION FOR ADMISSION

Before completing this section, read the section on *"Course admission"* in the prospectus.

A.1 Study Field: (Choose one only)

☐ Agronomy ☐ Large Stock ☐ Pomology ☐ Table Grapes

☐ Vegetables ☐ Sheep & Wool ☐ Wine Grapes Other (Specify) ☐

☐ Extension

☐ Cellar Technology ☐ Bridging - Cellar Technology

A.2 Biographic particulars of applicant.

Biographic particulars of applicant.

Surname ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Initials ☐☐☐☐

Title ☐ Mr ☐ Mrs ☐ Miss Other ____________________

Full names ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Have you been registered at the Institute before? ☐ Yes ☐ No If so, please state your student number ☐☐☐☐☐

Identity number ☐☐☐☐☐☐☐☐☐☐☐☐☐ Year of first registration, e.g. 1998 ☐☐☐☐

Date of birth ☐☐☐☐☐☐☐☐ Maiden name (if applicable) ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

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Place of birth ☐☐☐☐☐☐☐☐☐☐☐☐☐ Local municipality of permanent residence ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Title:

	Mr.
	Miss.
	Mrs.
	Other*

Sex:

	Male
	Female

*Specify

Marital state:

	Unmarried
	Married
	Other*

Citizenship:

	South African
	Other*

Population group:

	Asian
	Caucasian
	Coloured
	N-Sotho
	S-Sotho
	Tswana
	Xhosa
	Zulu

*Population group: Information needed by Government

Home language:

	Afrikaans
	English
	German
	Sotho
	Xhosa
	Zulu
Other*:	

Residential address: (Separate address line by means of a comma, e.g. 28 Amandel Drive, Amandelsig, Kuils River)

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Postal address: (Only fill in if different from residential address)

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Do you make use of a study bursary? ☐ Yes ☐ No If so, please fill in the "account address" below.

Account address (Only fill in if different from residential or pastal address)

Surname/ Organisation ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Initials ☐☐☐☐

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Address to which official correspondence should be sent: ☐ Residential ☐ Postal ☐ Other

If "other", fill in the appropriate address:

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Applicant's telephone number during normal office hours: ☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐
Dialling code Number

Applicant's telephone number after hours: ☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐
Dialling code Number

Cell phone number: ☐☐☐☐☐☐☐☐☐☐ Fax number: ☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐
Dialling code Number

E-mail address: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

B. PARTICULARS OF NEAREST RELATIVE/GUARDIAN

Kinship with applicant

- ☐ Father
- ☐ Mother
- ☐ Guardian
- ☐ Other (specify) ☐

Person's title

- ☐ Mr
- ☐ Mrs
- ☐ Miss
- ☐ Other (specify) ☐

Surname: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Initials: ☐☐☐☐

Residential / Postal address:

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☐☐☐☐☐☐☐☐☐☐☐☐ Postal code ☐☐☐☐ Home telephone no: ☐☐☐☐☐☐☐☐☐☐☐☐☐
Dialing code and number

Employer's address:

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☐☐☐☐☐☐☐☐☐☐☐☐ Postal code ☐☐☐☐ Home telephone no: ☐☐☐☐☐☐☐☐☐☐☐☐☐
Dialing code and number

C. PRELIMINARY REPORT REGARDING PROSPECTIVE STUDENT

C.1 Instructions::

1 This report must be completed by present matriculants themselves, as well as those who have already matriculated.
2 Persons who have studied at other colleges or universities, need not complete the school subject particulars, but must attach a copy of their school-leaving certificate to the application form before returning it. It is essential that the school name and matric year be indicated.
3 Present scholars must attach their original Grade 11 report / a certified copy as well as a certified copy of their ID document.
4 Persons who have completed their studies must attach a certified copy of their school-leaving certificate to the completed report form.

C.2 School record

Name of school: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

School's address: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐
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School's telephone no ☐☐☐☐☐☐ ☐☐☐☐☐☐☐☐☐☐
Dialling code Number

Year in which senior certificate has been/will be obtained: ☐☐☐☐

School subjects (Languages: Please indicate whether first or second language)

Year	School subject name	Percentage % Obtained
	Total/overall average %	

Statement:
I/We hereby state that the marks and/or symbols provided on this report form are correct.

…… …….…….. ……
Applicant Principal (Only applicable to matriculants) Date

Please note:
1 The information on this page must, in the case of scholars, be checked and/or furnished by the Principal.
2 Should you, on the strength of inter alia the above statement, be provisionally informed that your admission as a student would be in order, it would be done in good faith and on the distinct understanding that ultimately you will have to meet all the requirements set by the Institute for admission and registration before your admission can be finally approved.
3 Documents as prescribed in B.1 above must be attached.

School stamp

D. ACTIVITIES AFTER THE SCHOOL YEARS

Give full particulars of each year after matric before enrolment at Elsenburg (academic and non-academic)

Period				Name of University/Technicon/College, etc. Or non-academic activity, e.g. work, overseas, etc.	Name of degree / diploma / certificate / farm	Study completed Yes / No	Student Number
From		To					
Month	Year	Month	Year				

Please note: Prospective students who studied / have previously worked, must attach comprehensive study/work reports and certificates of conduct from the Institution involved, otherwise their applications cannot be considred.

E. ACCOMMODATION

Do you require accommodation in an Elsenburg hostel? ☐ Yes ☐ No

F. MEDICAL PARTICULARS

Do you suffer from any of the following? (information required for the benefit of disadvantaged persons.)

☐ Bad eyesight ☐ Cerebral palsy ☐ Other (specify)
☐ Deafness ☐ Speech defect

Do you make use of a wheelchair? ☐ Yes ☐ No

G. AGREEMENT

Undertaking by applicant:

I hereby state / Undertake

(a) that the information furneshed by me in this application form is true and correct;

(b) that I understand that the Institute is entitled to cancel my enrolment if it should appear that the particulars furnished in this application form are incorrect in any respect;

(c) that I have acquainted myself as to, and in future will keep myself acquainted with regard to the contents of the Institute's regulations and rules as approved from time to time by the Departrmental Head or by any other authorised body or person attached to the Institute;

(d) that I commit myself to comply with all the regulations mentioned in (c) above during all my study years, as well as the amendments or substitutions thereof;

(e) that I agree not in any manner to bring any action whatsoever against the Institute or any one of its employees, and not to hold the Institute responsible for any damage or loss which I personally, or as far as any of my possessions are concerned, may suffer and which directly or indirectly may result from my participation during my study years at the Institute in any activity of whatever nature, which may be related to my study or training, or sport or recreation of whatever nature, irrespective of the manner in which such damage or loss may occur, and that I will participate in any of the mentioned activities at my own risk and accept the risk attached to it voluntarily;

(f) that I authorise the Institute, should I require urgent medical treatment, to obtain suitable medical assistance, and I accept the responsibility for payment of the costs so incurred;

(g) That I commit myself to the prompt payment of all study, tuition, accommodation and other fees raised from time to time by the Institute during my period of study;

(h) to pay all the Institute's legal costs if I should fail to meet any of my financial obligations mentioned in (g);

(i) to pay all study fees upon registration. Postponement for a maximum of 30 days may be allowed, after which time interest at current government rates will be raised on all outstanding amounts;

(j) I HEREBY CONSENT TO THE PROCESSING OF THE PERSONAL INFORMATION AND SPECIAL PERSONAL INFORMATION IN THE CASE OF A MINOR PROVIDED IN THIS DOCUMENT FOR THE PURPOSES OF AN APPLICATION FOR ADMISSION TO STUDY AT THE WESTERN CAPE GOVERNMENT'S ELSENBURG AGRICULTURAL TRAINING INSTITUTE.

Applicant's signature: …….. Date: ……

Undertaking by parent or guardian:

(This portion must be completed by the parent or guardian of a minor applying for admission to the Institute)

I hereby state

(a) that I have aquainted myself as to, and consent to the undertaking above, and state that the particulars given by him/her on this application form are true and correct;

(b) that I in particular agree that my child/ward under age bind himself/herself to comply during all his/her study years with the regulations and rules of the Institute as approved from time to time by the Departmental Head or any other authorised body or person attached to the Institute;

(c) that I hereby jointly and separately with my child under age accept responsibility for the payment of all fees mentioned in (g), (h) and (i) above which he/she might owe to the Insitute during his/her total period of study at the Institute (including study after attaining his/her majority), and agree to pay it promptly;

(d) that I agree not in any manner to bring any action whatsoever against the Institute or any one of its employees, and not to hold the Institute responsible for any damage or loss which I personally, or as far as any of my possessions are concerned, may suffer and which directly or indirectly may result from my child's participation during his/her study years at the Institute in any activity of whatever nature, which may be related to his/her study or training, or sport or recreation of whatever nature, irrespective of the manner in which such damage or loss may occur, and that he/she will participate in any of the mentioned activities on his/her own risk and accept the risk attached to it voluntarily, and I further undertake to indemnify the Insitute and any employee of the Insitute if my child under age, with my assistance, cannot sufficiently in law secure the Insitute against liability as explained above.

(e) I HEREBY CONSENT TO THE PROCESSING OF THE PERSONAL INFORMATION AND SPECIAL PERSONAL INFORMATION OF MY MINOR CHILD PROVIDED IN THIS DOCUMENT FOR THE PURPOSES OF AN APPLICATION FOR ADMISSION TO STUDY AT THE WESTERN CAPE GOVERNMENT'S ELSENBURG AGRICULTURAL TRAINING INSTITUTE.

……..	……..	……..
Parent's/Guardian's signature	Capacity (father/mother/guardian)	Date

H. CHECKLIST

Go through the checklist to make sure that you understand what is written in the application form and what you need to do. The checklist will also help you to make sure that your application is complete.

You can contact the College at 021 808 5451 or study@elsenburg.com if you have any questions.

		Tick when done:
1.	**Have you made sure of the closing date of the programme for which you are applying?** **Take note of the following closing dates:** • **30 June:** Higher Certificate in Agriculture and Equine Studies with late applications until 31 July. Please note that late applications will only be considered if space is still available in the particular programme. • **31 October:** Diploma in Agriculture, Cellar Technology and Extension. No late application will be accepted.	
2.	**If you have applied for a residence, have you noted that places in residences are limited and subjected to a selection process?** There is no guarantee that you will be placed in a residence or even in a residence of your choice.	
3.	**Have you made sure of the address to which the application form must be posted?** The postal address is on the front page of this application form. The application form may not be faxed/emailed.	
4.	**Higher Certificate applicants, have you included your proof of payment of the application fee of R100?** **Take note:** If your application is not accepted or if you withdraw your application, the application fee will not be refunded. **Use your surname and initials as reference.** The Elsenburg Agricultural Training Institute's banking details are: • Account Holder DEPARTMENT OF AGRICULTURE, Nedbank, branch code 145 209, account number 1452 045 119	
5.	**Do you understand your responsibilities as set out in section G? If you did not understand something, did you ask for an explanation?**	
6.	**Do you understand that you will not be able to claim for any harm to you or your property or the loss of your property, caused while you are on College property?**	
7.	**Have you signed section H?**	
8.	**Has(ve) your parent(s)/guardian(s) signed section G?** **Do they understand that, by signing section G, they are confirming that they understand the surety arrangement?**	
9.	**Did you include the relevant documents? Your application is not complete and cannot be considered without the documents below. We will accept the date of receiving your completed application form as the date of application.** Take note: • If you are in Grade 12 at present, include a certified copy of your Grade 11 final examination symbols. • If you have already finished school (regardless of whether or not you are attending/have attended another university or college), please include a certified copy of your final school certificate, as well as the results of any additional examinations. • If you are following/have followed or have obtained degrees or diplomas from other universities or colleges, include a certified copy of your academic record (current and historical) and a certificate of conduct. • If you are not a South African citizen, include a copy of your residence or study permit and SAQA Evaluation Certificate	
10.	**Do you confirm that the information you have given in this application is correct?** If the information is incorrect the College is entitled to reject your application, terminate your admission or cancel your registration immediately.	
11.	**Have you made sure that you have filled out the correct application form?** The course you are applying for is indicated on the front page of this application form.	