SEKHUKHUNE FURTHER EDUCATION AND TRAINING COLLEGE

ENROLMENT FORM - NATED

STUDENT NUMBER	

TITLE	SURNAME OF STUDENT																
FIRST NAMES																	
ID NUMBER																	
GENDER	M		F		DISABLED		Y		N								
	(Specify disability)																
STUDENT CELL																	
LANGUAGE	ENGLISH		SEPEDI		OTHER (Specify)												
RACE	BLACK		COLOURED		OTHER (Specify)												
NATIONALITY	SA		OTHER (Specify)														
PARENT/GUARDIAN																	
POSTAL ADDRESS																	
	PROVINCE				Postal Code												
TEL No HOME																	
PARENT CELL																	
COURSE	CIVIL ENGINEERING														GRADE: N5		

SUBJECTS	AMOUNT
QUANTITY SURVEYING	
BUILDING & STRUCTURAL SURVEYING	
BUILDING ADMINISTRATION	
BUILDING AND STRUCTURAL CONSTRUCTION	
First payable amount upon registration: R1000	
TOTAL	

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NAME: LECTURER **SIGNATURE** **NAME: DATA CAPTURER**

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DATE