

SEKHUKHUNE FURTHER EDUCATION AND TRAINING COLLEGE

ENROLMENT FORM – NCV

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:	MARKETING MANAGEMENT													LEVEL: 3					
SUBJECTS														AMOUNT					
ENGLISH																			
MATHEMATICAL LITERACY																			
LIFE ORIENTATION																			
MARKETING																			
ADVERTISING AND PROMOTIONS																			
MARKETING COMMUNICATIONS																			
CONTACT CENTRE OPERATIONS																			
First payable amount upon registration: R1000																			
															TOTAL				

..... NAME: LECTURER SIGNATURE NAME: DATA CAPTURER

..... DATE