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	LEVEL: 4
SUBJECTS		AMOUNT
ENGLISH		
MATHEMATICAL LITERACY		
LIFE ORIENTATION		
MARKETING		
ADVERTISING AND PROMOTIONS		
MARKETING COMMUNICATIONS		
CONTACT CENTRE OPERATIONS		
First payable amount upon registration: R1000		
	TOTAL	

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NAME: LECTURER SIGNATURE NAME: DATA CAPTURER

…….
DATE