



## Student Registration Form

**Student Information: (Please print)**

<b>National ID</b>				<b>Date of Birth</b>					
<b>Full Names</b>				<b>Surname</b>					
<b>Nick Name</b>				<b>Maiden Name</b>					
<b>Email Address</b>				<b>Contact Number</b>					
<b>Title</b>		<b>Gender</b>		<b>Ethnic Group</b>	<b>African</b>	<b>Indian</b>	<b>Coloured</b>	<b>Asian</b>	<b>White</b>
<b>Marital Status</b>	<b>Single</b>	<b>Married</b>	<b>Divorced</b>	<b>Widowed</b>	<b>Dependants</b>		<b>Employment Status</b>	<b>Yes</b>	<b>No</b>
<b>ID Type</b>	<b>Passport No</b>		<b>Driver's License</b>		<b>Temp ID No</b>		<b>Birth Cert No</b>		
<b>Physical Address</b>				<b>Postal Address</b>					
<b>Address Code</b>				<b>Postal Code</b>					

**Nationality: (Please tick the relevant country you are from)**

Angola	Asian Countries	Australia & New Zealand	Botswana	Brittan & British Isles	Central & South American Countries
European Countries	Lesotho	Malawi	Mauritius	Mozambique	Namibia
North American Countries	Other & Rest of Oceania	Rest of Africa	SADC	Seychelles	South Africa
Swaziland	Tanzania	Zaire	Zambia	Zimbabwe	Other

**Home Language: (Please tick)**

Afrikaans	English	isiNdebele	xiTsonga	isiXhosa	isiZulu
sePedi	seSotho	seTswana	siSwati	tshiVenda	Other

**Disability Status:(Please tick)**

<b>Communication</b>	<b>Emotional</b>	<b>Hearing</b>	<b>Intellectual</b>
<b>Physical</b>	<b>Multiple</b>	<b>Unspecified</b>	<b>None</b>

**Educational Status:(Please print)**

<b>Last School Attended</b>		<b>Grade Completed</b>	
<b>School District</b>		<b>Year Achieved</b>	
<b>Highest Qualification</b>		<b>Year Achieved</b>	
<b>Institution</b>		<b>Awards</b>	



**Employment Details: (Please print)**

Company		Job Title	
Start Date		Employment Status	
Industry		Contact Number	

**Alternative Contact Details: (Please print)**

Name and Surname		Contact Number	
Relationship		Email Address	

**Qualification/Course Enrolment: (Please print)**

Qualification / Course Title		NQF Level	
SAQA ID		Credits	
Course Code		Notional Hours	
Registration Date		Enrolment Date	

*"I, \_\_\_\_\_ (STUDENT NAME), \_\_\_\_\_ (STUDENT ID NUMBER), am fully aware that the programme I have enrolled in with Future Performance Training (Pty) Ltd is registered with the Department of Education and that Future Performance Training (Pty) Ltd is accredited to offer this qualification.*

*I hereby confirm that I am aware of Future Performance Training's cancellation and refund policy. I hereby declare that I will adhere to the student code of conduct provided to me and signed by me.*

Signed At			
Student Signature		Signature Date	

**Administration and Document Control: (To be completed by the Admissions Officer)**

Documents Submitted & Verified	Certified Copy of ID/Passport	Certified Copy of Highest Certificate	Proof of Residence	CV / Profile
Verified By			Verification Date	
Entry Requirements	Meets Entry Requirements	Does Not Meet Entry Requirements	Requires Bridging Course	
Admission Decision	Admit Student	Do Not Admit Student	Requires Additional Documents	
Authorised By			Authorised Date	