Application for Registration

Procedure for enrolment:

- 1. The potential student, guardian and/or sponsor is required to complete the application form in full.
- 2. Upon receipt of application, a student advisor will be in contact with the potential student to discuss the outcomes of the application and the way forward.
- 3. Should the potential student be accepted and would like to proceed with their registration, an invoice will be provided to the student with the required banking details for payment along with a list of any required documentation deemed necessary to process the registration.
- 4. To secure enrolment, the registration fee will be required within 48 hours after receipt of invoice. 5. Registrations will only be deemed completed should a student be accepted and the registration
- fee along with all required documentation have been provided to conclude the process of application.

application. 6. Please note: The Academic Institute of Excellence does not qualify for NSFAS Bursary Funds as we are a Private Higher Education Institute.	
1. Applicant Details	
DOB:	9/3/1973
Student Number (returning):	null
First Name:	Registration 29 2024
Surname:	Test
Gender:	Male
Home Language:	English
High School Name:	null
Ethnicity:	Asian
Are You a SA Citizen:	no
SA Identity number:	null
Country Name:	India
Passport Number:	123456789023
Do you have any physical disabilities and/or barriers to learning?	no
Should you need assistance due to a physical disability and/or experience barriers to learning, please specify your disability/ies below for review and approval:	null
2. Programme Details	
Intake	2024, intake 1
Programme Name:	Higher Certificate in Project Management NQF5 (Construction Management)
Learning Method:	full_time_hybrid
Main campus:	Midrand
Include a Laptop:	yes
Specifications Available:	Medium_spec
3. Applicant Contact Details	
Address:	Home (Street) Address: - Jaipur Postal Zip code - 3243545 Delivery Address for study Material - null Postal Zip code - null Cell No: - 124345566577 Additional No: - null Email Address: - ta6387964@gmail.com

Nature Of Sponsor: Surname Of Account Payer:

4. Person Responsible For Account

First Names Of Account Payer:	Registration 29 2024
Company Name:	Registration 29 2024 Test
Legal Entity Number:	null
Address:	Street Address: - Jaipur Postal Zip code - null Postal Address: - null Postal Zip code - 3243545 Email Address - ta6387964@gmail.com
Identity/Passport Number:	123456789023
5. Payment Details	

Same as applicant

Purchase order

Test

6. Documentation

Payment Details

Please attach the following <u>certified</u> documentation to this application form: null

7. Disclaimer

I **Test** hereby confirm that the information supplied is true and correct. Confirmed at **23** on this **232** day of **23** 20**23**

registration form. 7. Acceptance Of Terms And Conditions

Terms and Conditions

I hereby confirm that I have read and understand the <u>TERMS AND CONDITIONS</u> as set out in the

Welcome to Our Service. Please read these terms and conditions carefully before using our website and services.

1. Introduction

By accessing our website and services, you agree to be bound by these terms and conditions. If you disagree with any part of these terms, please do not use our services.

2. User Responsibilities

As a user, you agree to provide accurate information and respect the intellectual property rights of others. You are responsible for any activity that occurs under your account.

3. Limitations of Liability

Our service is provided "as is" without warranties of any kind. We are not liable for any damages arising from

the use of our website or services.

4. Changes to Terms

bound by the revised terms.

We reserve the right to modify these terms at any time. By continuing to use our services, you agree to be

5. Contact Us

If you have any questions about these Terms and Conditions, please contact us at support@example.com. Thank you for using our service.