

# Faculty of ACCOUNTING & INFORMATICS

Address: Old Hotel School, Ritson Road Campus  
Tel: (031) 373 5152/5826



## APPLICATION IN TERMS OF RULE G10A FOR THE CONFERMENT OF STATUS OF A QUALIFICATION FOR REGISTERING FOR A HIGHER QUALIFICATION

STUDENT DETAILS (to be completed by applicant)				
Student Number				
Surname		First Name/s		
Identity Number				
Passport Number (International Student)				
Postal Address				
				Postal Code
Contact Number/s	Home	Work	Cell	
Email Address				

Qualification for which Applicant wishes to be registered for:

(e.g. BTech: Engineering: Mechanical)

Pre-Requisite Qualification for which status is applied for:

(e.g. NDip: Engineering: Mechanical)

Proposed year of registration:	Annual	Semester	Part-time	Full-time
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### I. ACADEMIC QUALIFICATIONS (Certified copies to be attached)

(i) Completed (if none, please state)	Date
(ii) Incomplete (if none, please state)	

### 2. PROFESSIONAL QUALIFICATIONS (Certified copies to be attached)


#### Declaration by Applicant:

I hereby make application in terms of Rule G 10A and certify that the details furnished in this application and the attached documentation are correct.

Signature of Student:

Date:

Routing: Student → HoD → Exco → Faculty Office

SECTION B: To be completed by Head of Department		
ASSESSMENT PANEL		
Name	Rank	Qualification
<b>The assessment panel recommends that the application be approved</b>		
Unconditionally	or subject to the following conditions	(please ✓ applicable block)
<b>i. Academic Requirements</b>		
<b>ii. Experiential Requirements</b>		
<b>iii. Any other requirements</b>		

SECTION C: RECOMMENDATIONS					
	Name	Signature	Approved (✓)	Not Approved (✗)	Date
<b>Head of Department</b> <i>(on behalf of the assessment panel)</i>					
<b>Executive Dean</b> <i>(on behalf of Exco of Faculty Board)</i>					
<b>Date of Exco Meeting when decision was taken</b>					

FOR OFFICE USE			
Received by		Date	
Processed by		Date	
Checked by		Date	
Faculty Officer		Date	

Routing: Student → HoD → Exco → Faculty Office