

**APPLICATION FOR REPLACEMENT OF DEGREE/DIPLOMA CERTIFICATE**

**CENTRAL STUDENT RECORDS**

College of Humanities

College of Law and Management Studies

College of Health Sciences

College of Agriculture, Engineering & Sciences

Tel: (031) 260-8598

Tel: (031) 260-8598

E-mail: [CentralStudentRecords@ukzn.ac.za](mailto:CentralStudentRecords@ukzn.ac.za)

E-mail: [CentralStudentRecords@ukzn.ac.za](mailto:CentralStudentRecords@ukzn.ac.za)

**M W MAKGOBA ADMIN. BUILDING**

**WESTVILLE CAMPUS**

**STUDENT INFORMATION**

STUDENT NO:			
SURNAME:		TITLE:	
FIRST NAMES:			
ID/PASSPORT NO:			
TEL.NO:		CELL NO:	
E-mail address:			
DEGREE/DIPLOMA FOR WHICH CERTIFICATE IS REQUIRED (e.g. BA):			
Campus where you studied:		Year of completion:	
Collect/Post (please indicate your choice with X)	<b>COLLECT</b>	<b>POST</b>	
<b>POST</b> (Please provide address)			

Student Signature.....

Date.....

**FOR OFFICE USE ONLY**

		<b>DATE</b>	<b>NAME</b>	<b>SIGNATURE</b>	<b>YES</b>	<b>NO</b>
<b>1</b>	<b>DEBTORS:</b>  <b>All fees for the above student are up to date</b>					
<b>2</b>	<b>CASHIERS:</b>  <b>A fee of R350.00 per certificate received</b>					

**IMPORTANT INFORMATION:**

- 1. Applications will be processed within 10 working days.**
- 2. The process might take longer for students who graduated before 1989.**
- 3. Any alterations/amendments to student particulars, i.e., forenames or surnames, shall remain and re-printed as per the graduation ceremony program. Such alterations/amendments are not done retrospectively.**

**Steps to complete application form [on or off campus]:**

1. Fill in the form
2. Deposit money into the bank account (details below), or take the form to Student Debtors, pay at Cashiers, and kindly return the forms to the Student Records Office.
3. Complete the attached affidavit and get it commissioned.
- 4. Email the completed application form together with a certified copy of your ID or Passport and a copy of the deposit slip (email address below).**

**NOTE:**

- a) The fee of **R350-00** (*applicable for 2025 only*) per degree/diploma must accompany this application form. (See banking details below.)
- b) Students can apply for a maximum of 5 certificates at a cost of **R350-00** each.
- c) No refund if it is found that there are Fees outstanding in your student account.
- d) Please submit the following: A certified copy of your ID and Proof of payment slip.
- e) Return the completed form to Central Student Records Office, MW Makgoba Admin Building, 2<sup>nd</sup> floor, room 225 or 226, or email to [CentralStudentRecords@ukzn.ac.za](mailto:CentralStudentRecords@ukzn.ac.za)**

BANKING DETAILS:

**KINDLY USE THE CORRECT BANKING DETAILS:**

Local Students

Bank: **Standard Bank**  
Name: **University of KwaZulu-Natal**  
Account number: **053080998**  
Branch Name: **Westville**  
Branch Code: **045426**  
Ref No. : **2188-30156 and your full names and surname.**

Foreign Students

Bank: **Standard Bank**  
Name: **University of KwaZulu-Natal**  
Account number: **053082826**  
Branch Name: **Westville**  
Branch Code: **045426**  
Ref No. : **2188-30156 and your full names and surname**

Foreign Students must use the Swift Code: **SBZAJJ**

AFFIDAVIT

**(You are requested to produce your ID Book when completing this affidavit)**

I, .....Identity number: .....

**(Print full names)**

the undersigned do hereby state that the reason (s) for which I wish to apply for a duplicate degree/diploma certificate(s) from the University of KwaZulu-Natal is/are the following:

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.....  
.....  
.....  
.....  
.....

**DEPONENT**

I hereby certify that the Deponent has acknowledged that he/she knows and understands the contents of this affidavit, which was signed and sworn to before me at ..... on this ..... day of ..... 2..... The regulations contained in Government Notice No.R1258 of the 21<sup>st</sup> day of July 1972, as amended, having been complied with.

.....  
**COMMISSIONER OF OATHS**

**STAMP**

**FULL NAME:** .....

**OFFICE:** .....

**ADDRESS:** .....