

UNIVERSITY OF KWAZULU-NATAL

This form is to be returned to the University at any of the following campuses
Edgewood, Private Bag X03, Ashwood 3605. Howard College, Durban 4041.
Medical School Private Bag 7, Congella 4013. Pietermaritzburg, Private Bag X01, Scottsville 3209
Westville, Private Bag x54001, Durban 4000

Surname:..... Student No.:.....

First Name:.....

Degree/Diploma/Programme:.....

Passport No:..... Campus:.....

Address:.....

FIRM ACCEPTANCE OF OFFER – EXCHANGE

I, (full names), Passport Number..... accept the offer of a place for studying for non-degree purposes. I undertake to bind myself to the University of KwaZulu-Natal and agree to pay the University of KwaZulu-Natal, in full, all fees and other charges due and payable by me in terms of the applicable annual schedule of fees as described in the Student Fees booklet and any other miscellaneous charges. I further agree that I am bound by the terms and conditions contained in the international Student Fees booklet, as updated annually, which I shall familiarize myself.

I understand and accept that unless the offer of a place in residence has been made to me, the university is **not** obliged to provide me with residence accommodation.

I understand and accept that I **will not** be permitted to register, or remain a registered student, if I should default on the payment of any funds due to the University of KwaZulu-Natal. **Interest as prescribed by the National Credit Act of 2005, (currently 2% per month) will be charged on all outstanding amounts.** I further understand and accept that my registration as a student is governed by the applicable legislation, and University Rules and Regulations as amended from time to time.

I enclose the completed Consent and Indemnity form.

Signature of Applicant: Date:

Address: Which above address shall be my *domicilium citandi et executandi* which address I may change provided written notice is given and which will only take effect upon receipt of such notice by the Registrar via the College.

.....
ASSISTED BY ME: (To be completed where Applicant is a minor – (UNDER 18 YEARS)

Signature of Parent/Guardian:..... Date:

Address:

SURETYSHIP

NOTE: Unless otherwise agreed in writing by the University, the suretyship must be completed by the applicant's parent or guardian.

I, the undersigned, **parent/lawful guardian** of the Applicant, do hereby bind myself to the University of KwaZulu-Natal as surety in *solidum* and co-principal debtor with the above named applicant for the due payment of all fees and other charges due and payable to the University of KwaZulu-Natal in terms of the relevant applicable annual schedule of fees. This suretyship shall operate as a continuing covering suretyship for all debts incurred by the applicant and shall continue operating **for the duration of study at the University** until such time as the debts are discharged.

Full names of Surety/Parent/Guardian: Date:

Address: Which above address shall be my *domicilium citandi et executandi* which address I may change provided written notice is given and which will only take effect upon receipt of such notice by the Registrar via the College.

Signature of Surety/Parent/Guardian: Social Security No.....

Date:

NON ACCEPTANCE OF OFFER

Student No:

Surname:First Name:

.....

I DO NOT accept the offer of a place in
Degree/Diploma/Programme.

Please indicate with an "X" in the appropriate block your reason for not accepting the offer of a place at this University in 2027:

- | | |
|--|--|
| 1 ☐ Financial | 5 ☐ Cannot obtain Residence Accommodation |
| 2 ☐ Attending another institution | 6 ☐ Other (Please specify) |
| 3 ☐ Personal | 7 ☐ No reason |
| 4 ☐ Accepted other UKZN choice | |

Signature of Applicant: Date:

For office use only:

ITS data changed to: by: Date: