

UNIVERSITY OF KWAZULU-NATAL

This form is to be return 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 x 54001, Durban 4000

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

First Name:.....Passport No.....Campus.....

Degree/Diploma:.....

Address:.....

FIRM ACCEPTANCE OF OFFER – INTERNATIONAL (Undergraduate and Postgraduate)

I, (full names), Passport Number accept the offer of a place for a degree/diploma on the clear understanding that I **have not** been granted Financial Aid by the University of KwaZulu-Natal and **acknowledge that my acceptance of offer does not in any way oblige the University to provide me with such financial assistance during my course of studies.** 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 Student Fees booklet, as updated from time to time, with which I shall familiarize myself and will continue to 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 abovenamed 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 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:Passport No.....Date:

COMMUNITY OF PROPERTY SURETY

If the parent/guardian is married in community of property, the following clause must be signed by his/her spouse:

I, the undersigned married in community of property to

..... hereby consent to the above suretyship.

Date: Signature:

As Witnesses: Signature:

Date: Signature:

Date: Signature:

24/08/2026

NON ACCEPTANCE OF OFFER

Student No:

Surname: First Name:

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

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: