



CONTACT DETAILS	Tel: 021 448 5432/3 Fax: 021 448 5434 Email: info@ttbisa.co.za www.ttbisa.co.za	Address: 12 Lower Liesbeek Avenue Off Liesbeek Parkway Mowbray, Cape Town South Africa, 7705
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Application for admission to study at the Institute

CRITERIA:

- Please complete this form in **CAPITAL LETTERS** using a black ballpoint pen.
- All relevant documentation should be attached to this application form.

SECTION A

PERSONAL DETAILS

SURNAME	Title (e.g Mr, Mrs, Miss, Ms)								
	Date of birth	D	D	M	M	Y	Y	Y	Y
FIRST NAMES	I.D. Number								
	Passport Number								
	Nationality								
	Have you registered at TTBISA before?	If Yes, please write your student number.							

SECTION B

PROGRAMME OF STUDY YOU ARE APPLYING FOR (please tick)

<input type="checkbox"/> Hotel Management	<input type="checkbox"/> Professional Cookery & Culinary Arts	<input type="checkbox"/> Event Management
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SECTION C

CURRENT SCHOOL LEAVING EXAMINATION DETAILS

School Name			
School Address			
Examination Body (e.g. Western Cape, Gauteng, IEB, CIE)			

SENIOR CERTIFICATE/SCHOOL SUBJECTS TO BE WRITTEN THIS YEAR

G* Grade / Level

Subject	G*	G*	G*	G*
1.		4.		7.
2.		5.		8.
3.		6.		9.

SECTION D

DETAILS OF YOUR ACTIVITIES AFTER LEAVING SCHOOL OTHER THAN TERTIARY EDUCATION (if any)

Activity	Activity
Period	Period

SECTION E

POSTAL ADDRESS FOR ALL YOUR CORRESPONDENCE. Start each line of the address in a new line.

Postal Code	Country Code	Telephone Dialing Code	Telephone Number	Fax Number	E-mail address																	

Do you have any disability, physical or otherwise, that might require assistance? (Please tick) YES NO

If yes, please tick. Visually impaired Hearing impaired Speech impaired Motor impaired

Do you suffer from a chronic illness? If yes, please specify:

Do you have any other disability? If yes, please specify:

Do you use a wheelchair? (please tick) YES NO

SECTION F

DETAILS OF YOUR PARENT/GUARDIAN (IF UNDER 21) OR YOUR NEXT-OF-KIN (IF 21 OR OVER)

Title				Initials				Surname														
Occupation												How is this person related to you? (e.g. Guardian)										

PARENT/GUARDIAN OR NEXT-OF-KIN ADDRESS (IF DIFFERENCE FROM THAT OF SECTION G)

Postal Code	Country Code	Telephone Dialing Code	Telephone Number	Fax Number	E-mail address																	

SECTION G

ACCOMODATION

Do you require assistance in obtaining accommodation?* (please tick) YES NO

SECTION H

FUNDING APPLICATION

How will you be funding your course? (please tick)

Own	<input type="checkbox"/>	Bank loan	<input type="checkbox"/>	Other	<input type="checkbox"/>
Parent/Guardian	<input type="checkbox"/>	Bursaries	<input type="checkbox"/>		

If you have selected Bank loan, Bursaries or Others, please give more details.

SECTION I

Please indicate in this section how you heard about The Tourism and Business Institute of Southern Africa. This information will be used to monitor and improve the services that we provide to applicants and prospective students.

Where have you heard about us? (please tick)

<input type="checkbox"/> Advertisement	<input type="checkbox"/> TTBISA International Office
<input type="checkbox"/> Institute visit / talk with TTBISA staff	<input type="checkbox"/> Friends / Family
<input type="checkbox"/> Career exhibition	<input type="checkbox"/> Others (please specify)
<input type="checkbox"/> TTBISA Web Page

SECTION J

APPLICATION FEE (PLEASE DO NOT ENCLOSE CASH)

Amount to be transferred to The Tourism and Business Institute of Southern Africa bank account is R

7	5	0,	0	0
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 per application.

Bank Details: Account Name: The Tourism and Business Institute of Southern Africa
 Account Number: 4068247315
 Branch Code: 630510
 Bank: ABSA
 Reference: PLEASE USE YOUR FULL NAME

SECTION K

CHECKLIST (please tick)

Your application will not be considered if it is incomplete or incorrect, or if the correct documentation is not attached. Please make use of this checklist.

- Have you completed all sections of this applications?
- Have you signed this form? Unsigned applications will not be considered.
- If you are under the age of 21, has your parent/legal guardian signed this application?
- Have you transferred the appropriate application fee to the corresponding bank?
- Have you filled in your correct date of birth?
- If you have attended a higher institution or any other institution, have you enclosed a certified copy of your certificate?
- Have you attached a certified copy of your ID / Passport

Please note that all relevant documents should be attached to your application form. If you have not yet obtained some of them please make reference to and state expected date(e.g. matric results). Your application form will be accepted conditionally.



DECLARATION AND UNDERTAKINGS BY APPLICANT

1. I, the undersigned have read and understood the contents of this application form and do hereby declare that to the best of my knowledge and belief, the above information is true and correct.
2. I understand that should any of the information supplied be found to be falsified, incorrect or misleading, my application will be nullified.
3. I undertake to abide to the Institute's rules and policies.
4. I hold myself responsible for the full payment of my fees for my chosen course. Such payment will be made on or before the due date stipulated by the Institute.
5. I understand that failure to pay my fees before the due date will result in the forfeiture of my seat.
6. I understand that the 50% deposit paid, so as to secure my seat at the Institute, is non-refundable.
7. I understand that all fees are to be paid directly into the Institute's Bank Account.

I hereby waive all claims against the Institute, its servants, agents or employees, for any loss suffered or damages caused, as a consequence of me being a student at the Institute, arising out of any bodily injury, illness or death suffered by me or any other person, or destruction or damage of any property belonging to me or another person however such destruction or damage is caused. Including but not limited to any loss or damage arising from any negligence, gross negligence, act or omission of the Institute, or its servants, agents, employees or any other person duly authorized to act for and on behalf of the Institute.

If you are under the age of 21, your parent or legal guardian must sign in the space provided.

I agree and consent to the information provided by the applicant and the terms of the declaration as illustrated above, made by the applicant and I consent to the applicant signing the registration form.

I hereby hold myself jointly liable with the applicant as co-debtor for all amounts due by the applicant to the Institute. I irrevocably undertake that I will not hold the Institute pliable in any capacity for any damage or loss suffered by the applicant or any other person under any circumstances.

Note: where an applicant is under the age of 21, this form must be signed together with either his / her parents and only by his / her legal guardian if the parents are deceased. If the applicant does not have either then the form is to be signed by their adult next of kin whose full details are to be provided.

<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<p style="text-align: center;">Parent/Guardian/ Next-of-kin Information details.</p> <p>Name: <input style="width: 90%;" type="text"/></p> <hr/> <p>Address: <input style="width: 90%;" type="text"/></p> <hr/> <p>Postal Code: <input style="width: 90%;" type="text"/></p> <hr/> <p>ID/Passport No. <input style="width: 90%;" type="text"/></p>
DATE	DATE	
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

CHECKLIST (OFFICE USE)

<input type="checkbox"/> Motivation Letter	<input type="checkbox"/> Copy of ID / Passport	<input type="checkbox"/> Matric certificate
<input type="checkbox"/> Testimonial from school	<input type="checkbox"/> Proof of payment	<input type="checkbox"/> Latest results