



APPLICATION FORM

The following documents should be submitted with the application form:

- 2 Certified copies of your ID
- 2 Certified copies of your Matric Certificate. Current Matriculants may submit a certified copy of grade their 11 results and any latest grade 12 results carrying a school stamp.
- One certified copy of your official tertiary academic record(s) (if applicable)
- CV
- 2 ID Photos
- Proof of payment of R650 (non-refundable) application fee

Course applied for:

- 1-year higher certificate in nursing (Auxiliary Nurse) R169
- 3-year diploma in nursing (General Nurse) R171

Study year applied for: 20_____

Personal Details

Surname/Last name

First name

Title/Prefix Mr Ms Miss Mrs Other

Middle name

Date of birth Gender (please tick ✓) Male Female

South African Identity Document no *

* See also 'citizenship' details below

Citizenship Details

Are you a South African citizen? Yes No

If No, are you a South African permanent resident? Yes No

If Yes, Permit number and date obtained: Permit number Date permit obtained
(Submit certified copies of the Permanent Residence Certificate and Permanent residence Visa in Passport) Year Month Day

If not a South African resident, please state nationality

If no SA Identity number, please supply Passport number

Are you a refugee? Yes No Are you an asylum seeker? Yes No

(If you are a refugee/asylum seeker, please attach a valid certified permit)

General Background

Population Group (Required for statistical purposes) Black Coloured Indian White Chinese

Home language (please tick ✓)	<input type="checkbox"/> Afrikaans	<input type="checkbox"/> Sepedi	Marital status (please tick ✓)	<input type="checkbox"/> Single
	<input type="checkbox"/> English	<input type="checkbox"/> SeSotho		<input type="checkbox"/> Married
	<input type="checkbox"/> Chinese	<input type="checkbox"/> Seswati		<input type="checkbox"/> Widower
	<input type="checkbox"/> French	<input type="checkbox"/> Setswana		<input type="checkbox"/> Divorced
	<input type="checkbox"/> German	<input type="checkbox"/> Sixhosa		<input type="checkbox"/> Seperated
	<input type="checkbox"/> Greek	<input type="checkbox"/> iSizulu		
	<input type="checkbox"/> Ndebele	<input type="checkbox"/> Tshlevende		
	<input type="checkbox"/> Italian	<input type="checkbox"/> Xitsonga		
	<input type="checkbox"/> Portuguese	<input type="checkbox"/> Other (please specify) <input type="text"/>		

Religious affiliation (please tick ✓)

<input type="checkbox"/> Christian	<input type="checkbox"/> Hindu	<input type="checkbox"/> Muslim	<input type="checkbox"/> Jehovah's Witnesses	<input type="checkbox"/> Jewish	<input type="checkbox"/> None	<input type="checkbox"/> Other (please specify) <input type="text"/>
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Current Activities

What has been your main activity during the current year? (eg. work/study)

Sports involvement: Please state in which sports you have participated (if any), and at what level:

Sport	Level*
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

* Level: - Club
 - School - Junior National
 - Senior Provincial

Please include postal code with all addresses

Section A: Applicant

* You must provide the nursing school with your domicilium catandi excecutandi. (The address nominated by you where legal notices may be sent) during the time of your registration at the nursing school. All formal and legal notices related to your registration, will be served at this address. It is your responsibility to notify the School of any changes in address.

* Domicilium address					
City		Province			
Country		Postal Code			
Physical address					
City		Province			
Country		Postal Code			
Postal address					
City		Province			
Country		Postal Code			

Contact numbers	Home no.		Business no.	
	Mobile no.			
	E-mail			

Emergency contact's details	Initials		Surname		First name	
	Mobile no.				Relationship	

Section B: Next-of-kin

Personal details	Title		Initials		First name	
	Surname					
	Relationship (tick relevant block): Mother <input type="checkbox"/> Father <input type="checkbox"/> Sibling <input type="checkbox"/> Other (specify) <input type="checkbox"/>					
Postal address						
City		Province				
Country		Postal Code				
Contact numbers	Home no.		Business no.			
	Mobile no.					
	E-mail					

Section C: Person liable for settlement fees

Personal details	Title		Initials		First name	
	Surname					
	Relationship (tick relevant block): Mother <input type="checkbox"/> Father <input type="checkbox"/> Sibling <input type="checkbox"/> Other (specify) <input type="checkbox"/>					
Postal address						
City		Province				
Country		Postal Code				
Contact numbers	Home no.		Business no.			
	Mobile no.					
	E-mail					

Grade 12 subjects and grades

*Current matriculants to submit final Grade 11 Grades

SUBJECT	GRADE / PERCENTAGE	APS POINTS

For office use only

Grade 12 subject %	Grade 12 subject symbol (Higher Grade)	Grade 12 subject symbol (Standard Grade)	Achievement level	Points to calculate overall APS
80-100	A		7	7
70-79	B	A	6	6
60-69	C	B	5	5
50-59	D	C	4	4
40-49	E	D	3	3
30-39	F	E	2	2
0-29	G	F	1	1

Employment Details

1. Are you currently employed? Yes No How many years of full-time employment will you have completed by the end of this year ?

Please provide details: (attach separate sheet if necessary)

Name of Company/Employer (please provide details of different positions with same employer)	Period employed (yy/mm/dd)		Job Title
	from	to	

I certify that my answers are true and correct to the best of my knowledge. I understand that false or misleading information in my application or interview may result in the cancellation of my application.

I _____ herewith confirm that I understand and accept the Disclaimer information above.

Signed: _____ Date: _____

QUESTIONNAIRE

Instructions: Please complete this questionnaire and submit it together with the required documentation and application form to Emmanuel Verpleegskool

1. What motivated you to pursue a career in nursing?

2. Who is your role model, and why?

3. What is your understanding of being 'a responsible person'?

4. What is your understanding of the word 'professional'?

5. Do you see yourself as a leader, and if so, explain why?
