

PRESENT SURNAME

MAIDEN SURNAME

.....

.....

FIRST NAMES (AS ON PASSPORT/BIRTH/IDENTITY DOCUMENT)

.....

*E-MAIL ADDRESS

2. Date of birth:

3. Postal Address:

.....

.....

Postal Code:

*CELL PHONE NUMBER

*FAX NUMBER

4. Full particulars regarding applicant's educational qualifications:

(a) School certificate: _____

(b) Post-school qualification

Name of certificate: _____

Name of diploma:

Year of completion:

Institution where obtained:

Examination Number:

Year of completion:

| School subjects passed | Month Year | Grade | Symbol | School subjects passed | Month Year | Grade | Symbol |
|------------------------|------------|-------|--------|------------------------|------------|-------|--------|
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Degree for which applicant proposes to study: Year of first registration: Name of proposed university:

OFFICIAL USE ONLY:
CONDITION:
FURTHER COMMENTS:

| | | | |
|---------|--------------|--------------|-----------|
| W.E.F.: | EXPIRY DATE: | MB OFFICIAL: | LANGUAGE: |
|---------|--------------|--------------|-----------|

TO HAVE YOUR QUALIFICATION EVALUATED FOR EMPLOYMENT PURPOSES PLEASE CONTACT SAQA [Help Desk: 0860103188(www.saqa.org.za)]

MATRICULATION BOARD

APPLICATION for an EXEMPTION CERTIFICATE for Admission to Bachelor’s Degree Studies

PO Box 3854, Pretoria, 0001
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 +27 (86) 677 7744
www.universitiessa.ac.za/mb

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 EMPLOYMENT PURPOSES PLEASE CONTACT SAQA
 [Help Desk: 0860103188(www.saqa.org.za)]**

NB: THIS FORM SHOULD ONLY BE COMPLETED BY CANDIDATES WHO INTEND TO REGISTER AT SA UNIVERSITIES (NOT TECHNIKONS OR COLLEGES)

A. This form must be accompanied by:

1. Original Educational qualifications (High School and post-school qualifications) or copies certified correct by the Registrar of a South African public university or by a South African Embassy, Consulate, High Commission or Trade mission or by public Notary in a foreign country. Sworn translations into either English or Afrikaans must accompany documents originally issued in another language.
2. Holders of American High School Diplomas must submit a letter issued by the Registrar of an accredited university in the United States of America to the effect that the holder is eligible for unconditional admission to degree studies at such a university or the applicable SAT results.
3. An Original official academic record reflecting the courses passed in different years, if the application is based on the grounds of post-school qualifications, with a prescribed minimum duration of at least three years uninterrupted study (RSA students only)
4. A certified copy of the particulars in the applicant’s identity document reflecting his/her date of birth, or of the applicant’s birth certificate.
5. A married woman must also submit a certified copy of her marriage certificate or divorce order.
6. The applicable exemption fee. The money is not refunded if the applicant does not qualify or fails to respond to letters regarding the application.
7. Applications for conditional exemption on the grounds of mature age, together with the Items mentioned under 1 to 6 above, must be submitted to the Registrar of the University at which the candidate proposes to register. The form must be signed by the Registrar if he supports the application.

FOR OFFICE USE ONLY

Receipt No. Amount:

Applicant No.

TO BE COMPLETED BY UNIVERSITY SUPPORTING THIS APPLICATION (“MATURE AGE” AND “SENATE’S DISCRETION” AND “FOREIGN CONDITIONAL” APPLICATIONS ONLY) (IF APPLICATION IS SUBMITTED BY UNIVERSITY)

Certificate: In the opinion of the Senate of this University, the abovementioned applicant may reasonably be expected to complete the course.

**OFFICIAL STAMP
 OF UNIVERSITY
 CONCERNED
 AND
 SIGNATURE**

STUDENT NO.:

**NB: IF APPLICATION IS SUBMITTED IN BATCHFORM BY UNIVERSITY – DO NOT INCLUDE THIS PAGE
 IF APPLICATION IS SUBMITTED BY AN INDIVIDUAL (NOT UNIVERSITY) – DO NOT INCLUDE THIS PAGE, UNLESS ALREADY ACCEPTED AT UNIVERSITY.**