

IOL ACADEMIC APPLICATION FORM



I.O.L.
INSTITUTE
FOR
OPEN LEARNING

OCT 2018

Education is the greatest equaliser

Please complete this form in full.

IOL STUDENT DETAILS:	
SURNAME:	FIRST NAME:
INITIALS:	MARITAL STATUS:
TITLE:	I.D. NUMBER:
DATE OF BIRTH: yy mm dd	POSTAL ADDRESS:
DELIVERY ADDRESS:	TOWN:
STREET ADDRESS:	CELL NO: HOME NO:
YES, I WILL COLLECT THE STUDY MATERIAL <input type="checkbox"/>	OFFICE NO: FAX:
PLEASE DELIVER THE STUDY MATERIAL <input type="checkbox"/>	EMAIL ADDRESS:

ARE YOU DISABLED? DESCRIBE:.....

- 1. ATTACH ALL YOUR SCHOOL QUALIFICATIONS (FOR 1ST YEAR ACADEMIC COURSES)
- 2. ATTACH ALL YOUR TERTIARY QUALIFICATIONS (FOR POST GRADUATE COURSES)
- 3. ATTACH THE NQA EVALUATION ON YOUR TERTIARY QUALIFICATIONS

STUDY BUDDY GROUP:

YES NO MY CONTACT DETAILS CAN BE MADE AVAILABLE TO OTHER STUDENTS
 YES NO CONTACT DETAILS OF OTHER STUDENTS CAN BE MADE AVAILABLE TO ME

EMPLOYER:..... ADDRESS:.....

PAY POINT:..... TOWN:.....

NEXT OF KIN/FRIEND (*not residing at the same address/must be 18 years or older*)

TITLE (MR/MS/OTHER):..... SURNAME:..... INITIALS:..... OCCUPATION:.....

DATE OF BIRTH:..... TEL/CELL:..... RESIDENTIAL ADDRESS:.....

EMAIL:..... SPECIFY THE RELATIONSHIP:.....

CIF NUMBER:.....

IOL OFFICE: WINDHOEK ONGWEDIVA KEETMANSHOOP RUNDU

 WALVIS BAY MARIENTAL GOBABIS KATIMA MULILO

METHOD OF PAYMENT: (SELECT ONE ONLY)

1. CASH PAYMENT:

LOAN AMOUNT: N\$	BANK DETAILS: INSTITUTE FOR OPEN LEARNING FIRST NATIONAL BANK ACCOUNT NUMBER: 62122858452 BRANCH CODE: 281872 COMPULSORY: FAX or E-MAIL or ATTACH - DEPOSIT SLIP + ID NUMBER + STUDENT / CIF NUMBER
ADDITIONAL STUDY MATERIAL: N\$	
GRAND TOTAL: N\$	

NO CASH SHOULD BE PAID to either IOL or TRUSTCO FINANCE PERSONNEL. The responsibility for lost cash remains that of the student.

DECLARE THE SOURCE OF THE CASH:

2. TRUSTCO FINANCE LOAN:

SEE / VERIFY THE LOAN APPLICATION FORM FOR: LOAN AMOUNT +
ADDITIONAL STUDY MATERIALS + APPLICABLE OTHER FEES PAYABLE

= GRAND TOTAL: N\$.....

ESSENTIAL DOCUMENTS: CERTIFIED COPY OF ID
COPY OF LATEST PAY SLIP
LETTER OF APPOINTMENT

IOL WILL NEED A DECLARATION UNDER OATH IF THERE IS A VARIATION OF YOUR ID PARTICULARS REFERRING TO THE ID, SALARY SLIP AND RELEVANT DOCUMENTS

THIS IS A LEGAL AND BINDING CONTRACT BETWEEN THE INSTITUTE FOR OPEN LEARNING AND THE UNDERSIGNED

I DECLARE THAT,

NO CANCELLATIONS WILL BE ACCEPTED AFTER REGISTRATION

- (1) All the particulars furnished by me on this form are true and correct, and I undertake to comply with rules, regulations and decisions of IOL, and any amendments thereto, and have taken note of advice which may be applicable to students in general and/or to the field of study for which I am registered;
- (2) The duty is upon myself to establish the level of benefits, if any, offered by my employer in case of successful completion of the course;
- (3) IOL shall be entitled upon notice to the student to provide such equipment or material as it deems necessary in the interest of the student;
- (4) Any cost incidental thereto shall be added to the fees payable. The student mandates IOL to instruct TRUSTCO FINANCE to adjust the loan accordingly;
- (5.1) In case of the goods being delivered by the Seller to the Purchaser, the address submitted by the Purchaser in this agreement shall be deemed to be the official delivery address of the Purchaser and all goods purchased shall be deemed to have been delivered to the Purchaser;
- (5.2) The Purchaser shall be liable to provide the Seller with written notice to the Seller on changing his/her address for the purposes of delivery;
- (5.3) All goods will become the risk and responsibility of the Purchaser once goods have been offloaded at the Purchaser's address set forth in the heading of this Contract. Delivery of the goods shall discharge the Seller of its obligations in terms of this agreement;
- (5.4) The Seller shall not be liable for the loss of goods or profit or any damages to the delivered goods if delivered to Purchaser's address;
- (5.5) In the case of delivery by any other means including that of the Purchaser collecting the goods from the Seller's premises, delivery is deemed to have taken place upon the delivery receipt being signed by the Purchaser and the risk of damage to or the loss of the goods shall pass to the Purchaser at the time of delivery;
- (5.6) It is precedent that the Seller shall not be liable for the loss of profits or any damage direct or indirect, consequential or otherwise, sustained by the Purchaser in consequence of deliveries, which may be in any respect incurred, or in consequence of non-delivery or late deliveries due to breakdowns of machines, strikes, labour disputes, wars, riots, civil commotion, delays by manufactures, or in transport accidents, legislation or regulations of any government or other authority, or other causes beyond our control;
- (5.7) Any times or dates for delivery or performance quoted by Seller are business estimates only and do not contribute contractual obligations;

PLEASE NOTE!!....IT WILL TAKE 10 WORKING DAYS TO FINALISE YOUR REGISTRATION

STUDENT (Signature):

DATE:

MARKETER (name & surname):

SIGNATURE:

DATE:

APPROVAL OF YOUR APPLICATION MAY BE DELAYED IF ANY OF THE ABOVE INFORMATION IS NOT INCLUDED

CERTIFICATE IN EARLY CHILDHOOD EDUCATION (CECE) 1 YEAR COURSE MAXIMUM STUDY PERIOD 3 YEARS

YOU WILL RECEIVE A FREE e-BOOK READER/KINDLE WITH ALL YOUR STUDY GUIDES LOADED ON THE DEVICE

MY PREFERRED MOTHER TONGUE IS:

ENGLISH SILOZI OTJIHERERO KHOEKHOEGOWAB
 AFRIKAANS OSHIKWANYAMA OSHINDONGA

PLEASE NOTE:

THE CHOSEN MOTHER TONGUE IN THE 1ST YEAR OF STUDIES WILL REMAIN AS IS FOR THE DURATION OF THE COURSE.
 NO CHANGE WILL BE ALLOWED.

EXAMINATION VENUES:

MWESHIPANDEKA SS <input type="checkbox"/>	DAVID SHEEHAMA SS <input type="checkbox"/>	PIONIER BOYS SS <input type="checkbox"/>
BRENDAN SIMBWAYE PS <input type="checkbox"/>	NOORDGRENS SS <input type="checkbox"/>	ANGRA PEQUENA SS <input type="checkbox"/>
FRIDRICH AWASEB SS <input type="checkbox"/>	PAREISIS SS <input type="checkbox"/>	KEETMANSHOOP TRC <input type="checkbox"/>
OMARURU LIBRARY <input type="checkbox"/>	REHOBOTH TRC <input type="checkbox"/>	WALVIS BAY/IOL OFFICE <input type="checkbox"/>
MARIENTAL PRIVATE SCHOOL <input type="checkbox"/>	CORNELIUS GOROSEB SS <input type="checkbox"/>	HAIMBILI HAUFIKU SS <input type="checkbox"/>
BEN V/D WALT PS <input type="checkbox"/>	PUTUAVANGA SS <input type="checkbox"/>	
USAKOS SS <input type="checkbox"/>	HEROES PS <input type="checkbox"/>	

SEMESTER 1 SEMESTER 2 SEMESTER 1 AND 2

DIPLOMA IN EARLY CHILDHOOD EDUCATION (DECE) 1 YEAR COURSE MAXIMUM STUDY PERIOD 3 YEARS

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USAKOS SS <input type="checkbox"/>	HEROES PS <input type="checkbox"/>	

SEMESTER 1 SEMESTER 2 SEMESTER 1 AND 2

PLEASE NOTE:

The entry requirement to register for the "Diploma in Early Childhood Education" is proof that you have completed the Certificate in Early Childhood Education