

STUDENT NO.:								
--------------	--	--	--	--	--	--	--	--

APPLICATION FOR RE-ADMISSION 2024

(For more information visit our website: www.univen.ac.za)

RETURN THIS FORM BEFORE 31 OCTOBER 2023

R100-00 APPLICATION FEE MUST BE PAID AT ABSA BANK ACCOUNT NO. 1 000 000 589 AND STATE YOUR STUDENT NUMBER ON REFERENCE COLUMN. KINDLY ATTACH THE DEPOSIT SLIP ON THIS APPLICATION FORM

(NB: Application forms without this fee will not be considered and if applying for the first time at this University, make sure you fill in the general application form (undergraduate form as well)

The following certified copies must accompany your application:

- (a) I.D. Book
- (b) Standard 10 (Grade 12) certificate

Application form can be sent through postal to:

University of Venda
New Student Administration Building
Student Admissions
Private Bag X5050
THOHOYANDOU
0950

They can be submitted by hand or personal delivery at

New Student Administration Building, Cubicle 1 or 2 or 3.

RE-ADMISSION TO POSTGRADUATE STUDIES

- Faculty of Health Sciences
 - HS.postgradapplications@univen.ac.za
- Faculty of Humanities, Social Sciences and Education
 - HSSE.postgradapplications@univen.ac.za -
- Faculty of Management, Commerce and Law
 - o MCL.postgradapplications@univen.ac.za
- Faculty of Science, Engineering and Agriculture
 - o SEA.postgradapplications@univen.ac.za

FOR INTERNATIONAL STUDENTS

International.admissions@univen.ac.za

AC	ADEM	IC YEA	R	2	0															
WH	EN DI	D YOU	LAST	REG	SISTI	ER	AT Th	HIS	UNIVE	RSIT	Y?		Т	Τ						
\vdash												Τ			 Ш					
Degree/Diploma/Certificate for which you wish to enrol Post Craduate Unior Degree Diplome Contificate																				
Pos	Post-Graduate Junior Degree Diploma Certificate										_	\neg								
First Choice Second Choice (if applicable)																				
PAF	PART A PERSONAL PARTICULARS																			
01	Titl	e M	r	М	rs		Ms 02: Surname													
03	Init	ials			04		Full	Van	nes											_
					0	5	I.D N	No						Τ				T		
	(If no I.D No. fill in passport number)										_									
	_																			
		ail Add		4																
	1-050	ai Auui	C33																	
				十	Т							Τ								
				\perp	\perp			_		_										
				+	+			+		+		+								
		+		+	+					+	\vdash	+								
						Po	stal C	ode												
	Tel.	No		T	T															
	1																			
									DECL	.ARA	TION									

· HOD:				
under			Date	
plicant Parent/			Date	
the progra by the Un I declare; that I conc guardians/	amme concerned, liversity. Clude this agreem /employer	, notwithstandir	g the acceptar	consent of my parents/
which may the Univer	y be charged by t rsity, if the applica	the University a ation is success	s a result of my ful.	y/his/her studies at
paragraph risk incide	2 on my/his/her	own responsib	lity and shall v	oluntarily accept the
suffer as a however, i tour/outing studies at	a result of any ha it may have resul g/excursion/visit o the University.	ppening, incide ted or as a resu or transport whi	nt, accident, in alt of my/his /he ch may take pl	jury, illness or death er participation in any ace during my/his/her
I/We herek and/or age	by absolve the Unents from any cla	niversity of Ven	student may a	cquire as a result of any
to inform the acquaint m	he School Admin nyself, with all the	e rules and gen		
to comply	with the rules an	d regulations of	the University	of Venda should my
	to comply application to inform to acquaint reprogramm I/We here and/or againjuries whowever, tour/outing studies at I/We acceparagraphrisk incide I/We here which may the Univer I am awar the prograby the Uril declare; that I conguardians that all papilicant	application be successful. to inform the School Admin acquaint myself, with all the programme for which I am I/We hereby absolve the U and/or agents from any cla injuries which I/the st uden suffer as a result of any ha however, it may have result tour/outing/excursion/visit of studies at the University. I/We accept that I/the stude paragraph 2 on my/his/her risk incidental thereto. I/We hereby accept liability which may be charged by the University, if the applicate I am aware that my enrolm the programme concerned by the University. I declare; that I conclude this agreem guardians/employer that all particulars given by	to comply with the rules and regulations of application be successful. to inform the School Administrator immediacquaint myself, with all the rules and generorgramme for which I am applying. I/We hereby absolve the University of Ven and/or agents from any claims which I/the injuries which I/the st udent may receive a suffer as a result of any happening, incide however, it may have resulted or as a result our/outing/excursion/visit or transport which studies at the University. I/We accept that I/the student shall particip paragraph 2 on my/his/her own responsibilitisk incidental thereto. I/We hereby accept liability for the payment which may be charged by the University at the University, if the application is success I am aware that my enrolment is valid only the programme concerned, notwithstanding by the University. I declare; that I conclude this agreement with the knoth guardians/employer that all particulars given by me on this form	to comply with the rules and regulations of the University application be successful. to inform the School Administrator immediately, if I chang acquaint myself, with all the rules and general regulations programme for which I am applying. I/We hereby absolve the University of Venda, its staff, en and/or agents from any claims which I/the student may a injuries which I/the st udent may receive and/or damages suffer as a result of any happening, incident, accident, in however, it may have resulted or as a result of my/his /he tour/outing/excursion/visit or transport which may take plastudies at the University. I/We accept that I/the student shall participate in the active paragraph 2 on my/his/her own responsibility and shall wrisk incidental thereto. I/We hereby accept liability for the payment of all study, which may be charged by the University as a result of my the University, if the application is successful. I am aware that my enrolment is valid only if it complies with the programme concerned, notwithstanding the acceptar by the University. I declare; that I conclude this agreement with the knowledge and C guardians/employer that all particulars given by me on this form are true and plicant