

Traditional education, Modern delivery.

## SACOB Education and Training (Pty) Ltd

88 Belvedere Road, Claremont, Cape Town, 7708

www.sacob.com | Tel: 08610 SACOB | Fax: 086 519 0162

| SACOB ENROLMENT QUESTIONNAIRE          |  |  |  |  |
|--|--|--|--|--|
| Kindly complete in full and return to: |  | Your course advisor or admin@sacob.com |  |  |
| Name:                                  |  |  |  |  |
| Email:                                 |  |  |  |  |
| Contact Number:                        |  |  |  |  |
| No.                                    | Questions:   | Answers:                               |  |  |
| 1                                      | Kindly confirm:  Full name of the registering student  i.e. Full name as per ID/Passport i.e. First Name/s, Middle Name/s, Surname   |  |  |  |
| 2                                      | Kindly confirm the name of the Qualification/s being registered:  e.g. CIMA - Certificate Level e.g. ICB Financial Accounting - Foundation Level   |  |  |  |
| 3                                      | Would this registration be for the:     A. Full Qualification     all subjects listed in the qualification     B. Specific subject/s within the Qualification     not all subjects listed / not the full qualification |  |  |  |
| 4                                      | If your answer to the above questions is B:  Then please confirm the names of the specific individual subjects for which you would like to register  |  |  |  |
| 5                                      | Kindly confirm your preferred study package:  A. Home Study B. Online Classroom C. Blended Learning  |  |  |  |
| 6                                      | A. Once Off Payment - EFT / Bank Deposit Pay all fees invoiced in one payment  B. Payment Plan – Deposit & B Debit Order Pay a deposit on studies and balance per debit order  |  |  |  |



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|    | Should the SACOB invoice:  |  |
|----|--|--|
| 7  | A. Include Institute Fees  Exam & student registration fees  |  |
|    | B. Exclude Institute Fees Exam & student registration fees   |  |
|    | <b>Kindly Note:</b> Institute Fees cannot be paid by means of payment plan   |  |
|    | In the event that students enrol their SACOB tuition via payment plan, we would suggest to first register the tuition with SACOB and then pay Institute Fees at a later stage as the student is ready to book each exam.   |  |
| 8  | Kindly confirm who shall be responsible for payment of fees:   |  |
|    | <ul> <li>A. The registering student</li> <li>B. Employer / Company</li> <li>C. Third Party – please specify relation e.g. Parents, Cousin, Guardian, Sibling</li> <li>D. Student Loan via NSFAS / FUNDI / Edu Loan</li> <li>E. Student Loan via Bank</li> <li>F. Other - if other, please specify</li> </ul> |  |
|    | In the event that an employer / company or third party will be paying for the invoice and studies:   |  |
| 9  | Please provide us with company details <u>or</u> details of third party responsible for fees:  |  |
|    | Company Name Company Address Company VAT Number (if applicable) Manager / Third Party Contact Details Name, Email, Contact Number  |  |
| 10 | In the event that the employer / company or third party requires specific detail to be stated on the invoice and/or registration letter - please confirm here:   |  |
|    | <ul><li>e.g. Invoice to state employee number</li><li>e.g. Invoice to state purchase order number</li></ul>  |  |
|    |  |  |
| 11 | Would the courier of study materials be delivered:   |  |
|    | A. Locally (within South Africa)     B. Internationally (outside South African Borders - this includes Lesotho and Swaziland)  |  |
|    | Kindly Note: Courier outside of South African may carry additional international courier charges   |  |

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Student - ID / Passport

2.

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|  |   | In the event that courier is being sent outside of South Africa, please confirm:  |  |  |  |
|--|---|---|--|--|--|
|  | 12  | Physical Courier Address (no postal addresses)  |  |  |  |
|  |   | Provide as much detail as possible so that we may quote appropriate courier fees and delivery times   |  |  |  |
| 1  |   | Do you have any disability or require specific assistance during your studies?  |  |  |  |
|  | 13  | i.e. Any disability/need which would require specific accommodation and assistance when completing studies in general, assignments or exams |  |  |  |
|  |   | If yes, please state nature and extent of disability  |  |  |  |
|  |   | Students may need provide records/evidence of any stated disability/special need  |  |  |  |
| 1  |   | Expected Date of Payment to SACOB:  |  |  |  |
|  | 14  | In order to determine the provision of study materials / courier times  |  |  |  |
| Suppliers / Vendors:   |   |   |  |  |  |
| In the event that a third party or company requires SACOB to register as supplier in order for payment to proceed on invoices provided:  |   |   |  |  |  |
| Kindly provide SACOB with specific supplier/vendor registration forms which SACOB shall complete and provide to you (along with any further required documents such as VAT, Tax, BEE, Cancelled Cheque etc.) |   |   |  |  |  |
| Acceptance and Registration Letters:   |   |   |  |  |  |
| Should the student/ third party / employer require an acceptance or registration letter, then SACOB shall require the following along with complete enrolment questionnaire answers:                         |   |   |  |  |  |
| 1  | 1. Student - to register SACOB student account by clicking on the following link: <a href="http://www.sacob.com/users/add">http://www.sacob.com/users/add</a> |   |  |  |  |

<u>Student Declaration and Undertaking</u> - [Please refer to our T's and C's on <u>www.sacob.com</u>]

Student - Marriage Certificate / Confirmation of Name Change (if applicable)

Student - Matric or Highest School Leaving Particulars

I declare that all particulars furnished by me on this form are true and correct. I undertake to comply with all the rules and regulations and decisions and policies and procedures of SACOB. Third Party / Manager Name (if applicable): Third Party / Manager Signature (if applicable): Student Signature: Date: