

162A Victoria St (opp. Nestlé)
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ADMISSION / REGISTRATION FORM

REG.NO.: LEARNER NO.:

A. LEARNER DETAILS (Attach Copy of I.D)				PRIVATE STUDENT:	CORPORATE STUDENT:			
TITLE:	NAME:	SURNAME:						
I.D NUMBER:			GENDER:					
PASSPORT / BIRTH CERTIFICATE NO.			NA	HOME LANGUAGE:				
SOCIO ECONOMIC STATUS:			Unemployed	EMPLOYEE NO:				
CITIZEN RESIDENTIAL STATUS:			South African	NATIONALITY: SA				
EQUITY:	<i>Black: African</i>	<i>Black: Coloured</i>	<i>Black: Indian/Asian</i>	<i>White</i>				
DISABILITY/SPECIAL NEEDS:		None						
HOME TEL NO.:			CELL NO.:					
E-MAIL:			FAX NO.:					
RESIDENTIAL/PHYSICAL ADDRESS:			<i>Urban</i>	<i>Rural</i>	CODE: 0			
HOUSE NO. AND STREET								
SUBURB:			TOWN/CITY:					
MUNICIPALITY:			PROVINCE:					
POSTAL ADDRESS (INVOICE):			<i>Urban</i>	<i>Rural</i>	CODE:			
POST BOX / PRIVATE BAG:								
SUBURB:			TOWN/CITY:					
MUNICIPALITY:			PROVINCE:					
B. COURSE DETAILS				COMMENCEMENT DATE:				
COURSE NAME:								
COURSE FEE:			DEPOSIT:	INSTALLMENTS:				
C. KIT ISSUED I certify that I have received the following Manuals, Assessment Guides /POE's, Pro-tech College Policies and Procedures regarding the course and unit standards and/or qualification that I will be assessed on, ticked below.								
LEARNER SIGNATURE:			Tick the relevant boxes below					
NAT CERT:IT:EUC QUALIFICATION: NQF L3-Credits130 SAQA ID: 61591/MICT SETA ID: 49077								
Module/s	Unit Std	Unit Std	Unit Std	Unit Std	Unit Std	Unit Std	Unit Std	Unit Std
EUC Skills: Intro PC's & Win , MS Word	117925	116932	258883	117867	116938	117924	119078	116942
EUC Skills: MS Excel, Cash, MS PPT	116937	116940	116943	114894		116933	117923	116930
EUC Skills: MS Access, Internet & Email	116936	117927	116931	116945	116935	14947	115391	
EUC Skills: Lang & Com , Numeracy	8973	8968	8969	8970	9010	9013	7456	9012
EUC Skills: Office Skills	7785	10135	10139	13915	11241	114076	110023	13931
Bookkeeping, Pastel Accounting	13999	12991	114736	243944	116938			
Pastel Partner Advanced		Pastel Technician		Sage One Accounting				
D. PAYMENT METHOD								
			<i>Cash</i>	<i>Cheque</i>	<i>Card</i>	<i>Direct deposit</i>		
AMOUNT PAID:		BALANCE OWING:						
FOR OFFICE USE ONLY:		Completed by:			Receipt No.:		Date:	

E. PERSON RESPONSIBLE FOR PAYMENT/ACCOUNT if not the learner! (Attach Copy of I.D and Payslip)									
TITLE:		NAME:		SURNAME:					
I.D NUMBER:					GENDER:				
PASSPORT / BIRTH CERTIFICATE NO.						HOME LANGUAGE:			
SOCIO ECONOMIC STATUS:						EMPLOYEE NO:			
CITIZEN RESIDENTIAL STATUS:						NATIONALITY:			
RELATION TO LEARNER:									
HOME TEL NO.:					CELL NO.:				
E-MAIL:					FAX NO.:				
RESIDENTIAL/PHYSICAL ADDRESS:			<i>Urban</i>		<i>Rural</i>		CODE:		
HOUSE NO. AND STREET									
SUBURB:					TOWN/CITY:				
MUNICIPALITY:					PROVINCE:				
POSTAL ADDRESS (INVOICE):			<i>Urban</i>		<i>Rural</i>		CODE:		
POST BOX / PRIVATE BAG NO:									
SUBURB:					TOWN/CITY:				
MUNICIPALITY:					PROVINCE:				
AUTHORISED/GUARDIAN SIGNATURE:							DATE:		

F. EMPLOYER (either the Learners (if employed) or the Person Responsible for Payment)									
EMPLOYER NAME / COMPANY NAME									
PHYSICAL ADDRESS OF COMPANY:			<i>Urban</i>		<i>Rural</i>		CODE:		
STREET NO. AND NAME									
SUBURB:					TOWN/CITY:				
MUNICIPALITY:					PROVINCE:				
POSTAL ADDRESS OF COMPANY:			<i>Urban</i>		<i>Rural</i>		CODE:		
POST BOX / PRIVATE BAG:									
SUBURB:					TOWN/CITY:				
MUNICIPALITY:					PROVINCE:				
NAME OF CONTACT PERSON (CORPORATEACCOUNT):									
HOME TEL NO.:					CELL NO.:				
E-MAIL:					FAX NO.:				
YOUR ORGANISATIONAL PROFILE: <i>A brief overview of your company and its main focus regarding products and services.</i>									
YOUR POSITION AND JOB PROFILE:									
DEPARTMENTAL ORGANOGRAM: <i>Enables your assessor to see where your department fits into the company and where your function sits.</i>									
LEARNER / PERSON RESPONSIBLE FOR PAYMENT			SIGNATURE:					DATE:	

G. YOUR MOTIVATION FOR COMPLETING THIS COURSE:			
To up skill my knowledge.			
To apply for a new job.			
Other motivation: (Please state)			
ARE YOU READY FOR ASSESSMENT:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
EDUCATIONAL BACKGROUND: (in date order: from the most recent to the oldest)			
RECOGNISED QUALIFICATIONS	PROVIDER'S NAME	YEAR QUALIFIED	
WORK EXPERIENCE: (list previous occupations/jobs from the most recent to the oldest)			
ORGANISATION	DEPARTMENT	JOB TITLE	YEARS
LEARNER SIGNATURE:			
H. GUARANTEE OF OBLIGATION/S TO LEARNERS			
Pro-Tech Business and Computer College and its Director/s hereby guarantee to meet its obligations and will provide quality education to its enrolled students/learners for as long as it remains a registered private higher education institution. Should Pro-Tech Business and Computer College close or be liquidated whilst a learner is enrolled, the learner will be reimbursed the monetary value that is legally due to him/her.			
DIRECTORS FULL NAME:			
SIGNATURE:		DATE:	
LEARNERS FULL NAME:			
SIGNATURE:		DATE:	
I. TERMS AND CONDITIONS OF REGISTRATION			
PLEASE READ TERMS AND CONDITIONS OF REGISTRATION ON NEXT PAGE			
I hereby acknowledge and accept the Terms and Conditions of Registration and that they have been explained to me in a language that I understand. I understand that the Terms and Conditions are legally binding between the Learner/Guardian /Person responsible for payment and Pro-Tech Business & Computer College.			
LEARNERS FULL NAME:			
SIGNATURE:		DATE:	
GUARDIAN/PERSON RESPONSIBLE FOR PAYMENT FULL NAME:			
SIGNATURE:		DATE:	

TERMS AND CONDITIONS OF REGISTRATION

COURSE REGISTRATION

REGISTRATION WILL BE PROCESSED UPON RECEIPT OF A COMPLETED AND SIGNED REGISTRATION FORM. TO AVOID DISAPPOINTMENT, IT IS ADVISABLE TO RETURN THE FORM TO PRO-TECH COLLEGE AT LEAST TWO (2) WEEKS PRIOR TO COURSE COMMENCEMENT. ANY COMPANY WISHING TO BOOK A CANDIDATE ON COURSE MUST SUPPLY AN OFFICIAL ORDER NUMBER.

THE SIGNED AND COMPLETED REGISTRATION FORM IS VALID FOR A PERIOD OF 1 YEAR. ALL COURSES BOOKED ON THIS FORM MUST BE ATTENDED WITHIN TWELVE (12) MONTHS OF REGISTRATION. A COURSE, ONCE STARTED MUST BE FINISHED WITHIN THE SPECIFIED COURSE PERIOD. SHOULD A LEARNER NOT COMPLETE THE COURSE WITHIN THE SPECIFIED COURSE PERIOD, R800 PER MONTH THEREAFTER WILL BE CHARGED. THE STUDENT WILL BE ALLOWED TO ATTEND THE NEXT COURSE AT THE SPECIFIED COURSE DATE.

EXAMINATION REGISTRATION

NATIONAL EXAMINATIONS ARE INCLUDED IN THE COURSE FEE. HOWEVER THE COURSE FEE DOES NOT INCLUDE REWRITE OF NATIONAL EXAMINATIONS WHICH IS R500. INTERNATIONAL EXAMINATIONS MUST BE BOOKED IN WRITING AT LEAST ONE (1) MONTH PRIOR TO THE REQUESTED DATE SO THAT PRO-TECH BUSINESS AND COMPUTER COLLEGE CAN BOOK YOU AT THE NEAREST TESTING CENTRE. ALL PRE-PAID EXAMINATIONS HOWEVER MUST BE WRITTEN WITHIN THREE MONTHS OF PAYMENT.

CANCELLATION/CHANGES & RE-SCHEDULING OF COURSES AND EXAMINATIONS:

1. COURSES

THIS COURSE REGISTRATION FORM MAY BE **CANCELLED OR CHANGED** IN FULL, **FIVE (5) DAYS** AFTER SIGNATURE, PROVIDED THAT THE LEARNER HAS NOT ATTENDED ANY CLASSES/LESSONS/TUITION WITHIN THE FIVE(5) DAYS AND PROVIDED THAT PROTECH BUSINESS AND COMPUTER COLLEGE RECEIVES WRITTEN NOTIFICATION WITHIN THE FIVE (5) DAYS. AN ADMINISTRATION FEE OF R500 WILL BE RETAINED/CHARGED FOR THE CANCELLATION OF COURSES.

ANYONE WISHING TO RE-SCHEDULE A COURSE MUST NOTIFY US IN WRITING AT LEAST TEN (10) WORKING DAYS PRIOR TO COURSE COMMENCEMENT. IF WE SHOULD NOT RECEIVE NOTIFICATION WITHIN THE TEN (10) DAYS, THE STUDENT OR CORPORATE WILL BE LIABLE FOR THE FULL COURSE FEE.

PRO-TECH BUSINESS AND COMPUTER COLLEGE RESERVES THE RIGHT TO RE-SCHEDULE ANY COURSE FOR ANY REASON WHATSOEVER EG. IN THE EVENT THAT THE MINIMUM NUMBER OF STUDENTS BOOKED TO ATTEND THE COURSE HAS NOT BEEN MET.

2. EXAMINATIONS

ANY CANCELLATION OR POSTPONEMENT OF EXAMINATIONS MUST BE IN WRITING NO LESS THAN TEN (10) WORKING DAYS PRIOR TO THE EXAMINATION DATE. SHOULD WE NOT BE NOTIFIED IN TIME, THE STUDENT WILL BE HELD LIABLE FOR THE FULL AMOUNT OF THE EXAMINATION FEE. THE LEARNER WILL NOT BE PERMITTED TO WRITE THE FINAL EXAMINATION IF THE COURSE FEE IS NOT PAID IN FULL. OUTSTANDING FEES OVER THREE (3) MONTHS WOULD BE HANDED OVER FOR DEBT COLLECTION.

PAYMENT TERMS

LEARNERS MAY NOT BE PERMITTED TO ATTEND A COURSE OR WRITE AN EXAMINATION UNLESS HIS/HER PAYMENTS ARE UP TO DATE. INTEREST AT 1.25% MONTHLY WILL BE CHARGED ON ALL OVERDUE BALANCES. **ONLY BANK GUARANTEED CHEQUES WILL BE ACCEPTED.**

NAME OF ACCOUNT: PRO-TECH BUSINESS AND COMPUTER COLLEGE BANK: NEDBANK BRANCH: ESTCOURT
BRANCH CODE: 134925 ACCOUNT NUMBER: 1020 921 595 REFERENCE: STUDENT NO. & NAME

TRAINING HOURS

DAY STUDENTS:		EVENING STUDENTS:		SATURDAY STUDENTS:	
COMMENCE	FINISH	COMMENCE	FINISH	COMMENCE	FINISH
8h00	10h00	17h00	19h00	8h00	10h00
10h30	12h30	FLEXI-TIME STUDENTS		10h30	12h30
13h00	14h30	15h00	17h00		

COURSE MATERIAL

ANY STUDENT BOOKING A COURSE MUST COMPLETE THE COURSE WITHIN THE SPECIFIED PERIOD. WHILST WE ENDEAVOUR TO KEEP EACH AND EVERY ONE OF OUR STUDENTS INFORMED, THE RESPONSIBILITY RESTS WITH THE STUDENT TO ENSURE THAT HE IS KEPT UP TO DATE AND THAT HE/SHE HAS THE LATEST COURSE MATERIAL AVAILABLE.