III UJ RESIDENTIAL APPLICATION 2024

STUDENT NUMBER STICKER

STUDENT NUMBER (PREVIOUSLY ALLOCATED)

ONL	LY FOR FIRST-TIME UNDERGRADUATE/POSTGRAI	DUATE E	NTER	ING A	APPI	_ICA	NTS	CL	OSI	NG D	ATE	: 31	OCTO	JBER	202	3 AT	12:0	0	
Year	r in which you require accommodation																		
A.	PERSONAL DETAILS																		
1.	SA identity number/Passport number (international a	oplicant)																	
2.	Surname																		
3.	First names in full																		
4.	Date of birth			D	M	M	Y	Υ	Υ	Υ									
5.	Gender			Male Female															
6.	Contact Details Cell		<u>Email</u>																
7.	Population group (compulsory), indicate with a tick must be completed)	Accor	According to legal requirements and government reporting purposes this sectio															ection	
	African Coloured		Indian					W	/hite					Otl	her				
B.	PARTICULARS TO SUPPORT DISABILITY (IF REQUI	RED)																	
	Applicants with disabilities (Please note: All housing is self-supportive)																		
	Would you require accommodation with modifications to support your disability?									N	0								
	The University must be informed of certain disabilities in order to determine whether it is able to make special arrangements to accommodate persons with such disabilities. It is the prospective student's responsibility to inform the PsyCaD Office: People with Disabilities and to make a declaration to the relevant professional board/s (where applicable) in this regard. Confidential advice can be obtained from the Office People with Disabilities, disabilityunit@uj.ac.za or 011 559 3745.											nake							
	If "Yes" state the nature																		
C.	ACCOMMODATION																		
You can only apply for accommodation on the campus where you will be attending classes (I											te w	ith a	tick	√)				
	uckland Park Kingsway (APK) Doornfontein (DFC		:)	Auckland Park Bunting Road (APB)									Soweto (SWC)						
_																			
D.	SIGNATURE/S																		
	ALL APPLICANTS TO COMPLETE AND SIGN	IF UNDER AGE - PARENT / LEGAL GUARDIAN TO COMPLETE AND SIGN															N		
	Initials and surname of applicant (name in print)	Initials and surname of parent/legal guardian (name in print)																	
	Signature of applicant (Duly assisted by his/her parent/legal guardian, as may be required by law)	S	ignat	ure (of pa	rent/	'lega	l gua	rdia	n							_		
	Date	_ D	ate																