



APPLICATION FORM

Application fee: N\$ 200-00 (Non-refundable)
Late application fee: N\$250-00 (Non-refundable)
International application fee: N\$ 350 (Non-refundable)

IMPORTANT NOTICE:

Kindly ensure that all requirements as stated in the conditions of acceptance (page 2) are met. Incomplete application form may cause delay or not be processed.

Required documents (to be attached on the application)

- Signed conditions of acceptance (page 2)
- Completed application form (from page 3)
- Signed arrangement of fee structure payments (Annexure A)
- Certified copy of highest grade (9/10/11/12)
- Certified copy of identity card/birth certificate/passport for foreigners
- Certified copy of proof of acceptance for study permit/application for study permit for foreigners
- Translation in English for documents in foreign language
- Certified copy of identity card/passport for person responsible for tuition fee payments
- Passport photo on the application form
- Proof of application fee payment

FOR OFFICIAL USE

Application received date:	Received by:
Application accepted/rejected	Reason for rejection:
All required documents attached	Yes/No if no, what is pending
Non-Namibia (proof of submission of study permit with ministry of home affairs) and valid passport	Yes/No
Student entered in student database	Yes/No
Student file created	Yes/No
Signature	Staff name:
Date:	Staff no:

CONDITIONS OF ADMISSION AND REGISTRATION

1. Admission into the school will largely depend on the meeting of requirements based on applicants latest/highest grade passed prior to the application date.
2. Should the applicant be enrolled at the discretion of the institution, it is the student's responsibility to meet the requirements and fulfill such admission arrangements on/before the date specified, otherwise his/her certificated will be withheld until such requirements are met, and the institution has the power to cancel such agreement and nullify the training with no refund/keep the certificate within the specified duration until the requirements are met.
3. Applicant acknowledge that he/she has inspected the institution premises and found it to be acceptable to address the applicants' training needs of the application.
4. The applicant accept that it is his/her responsibility to inform the institution of any special need prior to enrollment, should there be such needs or physical needs herewith declare that the applicant does not have any specialized education or physical need known to them. Should the applicant be diagnosed with special need, or any physical impairment not disclosed such need, and the institution is not able to address such needs. The institution has the power to cancel this contract of enrollment with due notice.
5. Receipt of this form and application fee payment does not guarantee admission of the applicant. The institution will advise the applicant/guardian regarding the status of application.
6. Successful applicants will only be granted placement and admission at the institution once application fee, registration fee and one (1) month deposit of tuition fee has been paid. Monthly instalments are due every month for eleven (11) months from the 30th of each month up to the 3rd of the next month. Example January fee are due in December until the 3rd of January. Failure to pay the instalment on time will result in penalty fee calculated at 15% cumulative of all late payments. Students with outstanding fees/instalment will not continue attending classes/practical/simulation or participate in any educational activity until such time that the payments are made from the 7th of the such month. Tuition fees can also be paid in advance but there is no refund should the applicant cancel/decided not to continue with the training.
7. Students with outstanding fees will also not be allowed to write the examination/test. And can only apply for special examination or test upon payments of all pending fees.
8. Upon registration, students will be required to sign code of conducts and indemnity form.
9. Although payments of tuition fee can be arranged over a period not-longer than 10 months, (January to October for Nursing), or (five months for caregiver/ 11 months for Nursing Foundation) inclusive of school holidays, student/parent/guardian accepts and understand that fee are charged annually, payable in advance and is **NOT REFUNDABLE ONCE THE TRAINING COMMENCED**, whether such student attended classes or not. Parents/guardian/student acknowledge that payments of tuition has been made available together with this acceptance of admission and registration letter and accepts terms and conditions regarding payment thereof. ANNEXURE A.
10. Written notice of one (1) full month is required should the student wish to withdraw from the institution.
11. By implication, notice received in the middle of the month would require payment of the following month's tuition fee. The school credentials or certifications will only be released once all school accounts are settled. Student accepts and understand he/she forfeits any right to recover fees paid in advance.
12. By signing this condition of acceptance and registration form, Applicant accepts to adhere to the terms and conditions of admission and registration with the school and set requirements in this agreement.

I..... (Name of the student) understand that this application will be processed as soon as all relevant documentations has been submitted.

Signature (parent if student is under 18)..... Student signature.....
Date.....

Name of the person responsible for payment of school fees.....
Cellphone number.....



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PROGRAMS: 1st choice -----
2nd choice -----

- Courses:
1. Certificate in Healthcare Assistant/Caregiver (6 months)
 2. Certificate in Basic Nursing Foundation (12 months)
 3. Diploma in Enrolled Nursing & Midwifery Science (2)

PERSONAL INFORMATION

Last Name _____

Name(s) _____

Date of birth _____

Identity Number/passport number _____

Sex _____

Marital status _____

Nationality _____

Town _____

Postal address: _____

Residential address: _____ **Street:** _____

Cellphone: _____ **Fax:** _____ **E-mail:** _____

Health issues

Do you have physical impairment or disability	yes	no
If yes, attach proof of such impairment or disability		
Based on your impairments/disability, do you have special needs, yes/no		
Please indicate such special need?		

SECTION 2: APPLICANT'S NEXT OF KIN/LEGAL GUARDIAN PARTICULARS

(To be contacted in case of emergency.)

Family relationship with the person whose particulars are supplied.											
Father		Mother		Spouse/partner		Guardian					
Title:	Mr		Ms		Other (specify)						
Surname:											
First Names in full:									Initials		
I.D. No.:											
Home Address (next of kin/guardian):											
Tel No.: Work											
Tel. No.: Home								Cell No.:			
Employer (next of kin/guardian):											
Occupation:											
Employer's Address:											

SECTION 4: SCHOOL LEAVING PARTICULARS

Last secondary school attended:			
Address of school:			
Highest grade passed:			
Current grade (if applicable):			
Date of examination:			
Examination number:			
Examination body:			
Subject (Best 6 Subjects, including English)	Level ## <i>(See table below)</i>	Symbol	

LEVEL			
ON = NSSC	IG = IGCSE	AL = A LEVEL	HG = HIGHER GRADE
NH = NSSC	HI = HIGCSE	OL = O-LEVEL	SG = STANDARD GRADE
			LG = LOWER GRADE

SECTION 5: POST-SCHOOL ACADEMIC QUALIFICATIONS

Note: A full Academic Record ISSUED by the INStitution SHOULD accompany THIS application.

Student No.	From Year	To Year	Name of University/College/Academy			
Name of Programme:				Awarded:	Y	N

Have you ever been refused admission to any Tertiary Institution?	Y	N
Are you currently enrolled at another institution of high learning?	Y	N
If 'yes' please indicate where.		

BANKING DETAILS:
 Compassion College
 Standard bank
 Account No:60005311674
 Oshakati



DECLARATION

I.....hereby declare that all the particulars given in this application form are true and correct. I further declare that my enrolment as a student at Compassion College shall be subject to the terms and conditions contained in the admission and registration policy which I shall adhere to after registration.

SIGNATURE OF APPLICANT

Date

SIGNATURE OF GUARDIAN
(If applicant is under 21 years of age)

Date

FOR OFFICIAL USE ONLY:	
APPLICATION RECEIVED BY: _____	DATE _____
APPLICATION FEE PAID: _____	RECEIPT NUMBER: _____
LATEAPP. FEE PAID: _____	RECEIPT NUMBER _____
<i>Please circle which is applicable: Accepted / Rejected</i>	