

Residence Admission Form 2013

Surname: First Name(s):

Student Number: Male Female (mark with X)

Degree/Diploma (e.g. BTh): Faculty: Level of study:

Contact Number: Age:..... ID/Passport No.:

Alt. Contact No.: Contact Person:

Postal Address: Code.....

Residential Address: Code.....

Any disability? If YES please state nature:.....

Full Names Of Parent/ Guardian/Next of Kin:

Contact No.:..... Sponsoring Church /Organisation:

I request: Single Room shared Room Family Flat

Letter confirming sponsorship attached: University Fees: Meals: Accommodation: (mark with X)

IF YOU ARE COVERED BY MEDICAL AID SCHEME:

Medical Scheme Name: Medical Aid No.:

Principal Member:.....

MOTOR VEHICLE

IF YOU INTED TO OPERATE A MOTOR VEHICLE ON LTI RESIDENCE, PLEASE PROVIDE:
 Type and Make of Vehicle:..... Registration No.:.....

CONTACT ADDRESSES

Father's Address/ Primary Next of kin	Mother's Address/ Secondary Next of kin
Telephone: (H)..... (W).....Cell.....	Telephone: (H)..... (W).....Cell.....

HOME CONGREGATION

Pastor's Name..... (H)..... Cell:	Telephone: (W)..... Address:.....
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For Office Use

Amount Paid: R Receipt No.:Room allocated No.:..... Key Issued:.....

All Forms Received: Application ID Copy Sponsorship Letter Financial Clearance
 Pledge Rules Confirmation of registration No fees outstanding:

Name: Signature: Date:/...../20.....

Flat No. /Residence Allocated: Administrator's Signature:

1. I understand that should I not be accepted as a sponsored student of my church or sponsoring institution, or not be re-admitted to studies on academic grounds following the 2012 second semester examinations, I will not be considered for a place in residence until I am formally, academically re-admitted for the 2013 academic year, and/or admitted as a sponsored student of my church/ institution. I understand that it is my responsibility to furnish proof of admission and sponsorship. I understand that if my sponsoring institution withdraws sponsorship, I will become liable for the fees payable. I understand that false assertions regarding sponsorship amount to fraud and will result in expulsion.
2. I understand that should I be selected for admissions to residence, I will not be permitted to actually move into a room allocated to me unless I have Financial Clearance from L TI (i.e. documentary proof of :
 - a) Payment of deposit of R **2,800.00**
and either or :
 - b) Full payment of remainder (being R **1,350.00** / month for a shared room, R **1 750.00** / month for a single room, R **3,230.00** / month for a couple and R **4,675.00** / month for a family flat.
 - c) Proof of sponsor that will pay residence fees on a monthly/ semester basis in advance

Students, who have not paid their residence fees in full for the previous semester or year, will not be admitted to residence. All students are charged from the 1st day of the semester.

3. I understand that if I fall behind in payment I forfeit the right to residence at L TI
4. I understand that only registered students of the University of KwaZulu-Natal, Lutheran Theological Institute or students in Ministerial training for the sponsoring churches, may remain in residence. Should I fail to become a registered student by the final date of registration for the semester, or should my registration be withdrawn during the course of the year, I understand that I forfeit my right to residence.
5. I understand that once I have occupied a room in residence, I am liable for the full residence fees for that room for the balance of the semester in question, and that any refunds are at the discretion of the L TI, and will not normally be granted. I acknowledge that should I decide to leave L TI Residence, I will give a written notice to L TI Administration, of my intention to withdraw from L TI Residence. I also acknowledge that it is my responsibility to apply.
6. I understand that it is a criminal offence to access rooms with keys that I have in my possession without these being formally issued to me at the beginning of the year concerned by L TI staff, and accessing rooms with such keys makes me liable to forfeit my rights of residence and to payment of Locksmith's fees of R **250.00** to change the lock in question. I commit myself to returning all keys issued to me, and any copies I made of these, to L TI at the end of my residence in the current year.
7. I also acknowledge that while in Residence I will abide by the Contract Pledge and Rules of the L TI residence, as well as the general University/ Institution rules. I hereby accept the conditions of this admission agreement, and declare that the information supplied is true and correct. and that I understood and agree with all the condition herein.

Remarks:

Applicant's Signature: Date

Place:

Contact details:
 Tel: (+27)033 260 6066 Fax (+27) 033 260 6072 Email:sharon@lti.org.za