



Private Bag X5008  
KIMBERLEY  
8300

Chapel Street  
KIMBERLEY  
8301

# APPLICATION FORM: RESIDENCE 20\_\_

(FIRST TIME APPLICANTS)

**COMPLETE THIS SECTION ONLY IF YOU REQUIRE ACCOMMODATION IN A UNIVERSITY RESIDENCE.  
(THE UNIVERSITY RESERVES THE RIGHT TO PLACE STUDENTS IN RESIDENCE AND THEREFORE  
APPLICATION FOR RESIDENCE IS NOT A GUARANTEE FOR PLACEMENT.)**

**FIELD OF STUDY APPLIED FOR**

1<sup>st</sup> Choice  2<sup>nd</sup> Choice

**PERSONAL DETAILS**

Surname

ID/Passport Number

First Names (As stated on ID/Passport)

Area Code  Home Telephone Number

Title (Please tick ✓)  
 MR  MRS  MS

Mobile Phone Number

Physical Address   
  
 Postal Code

E-Mail Address

Postal Address (if different from physical address)   
  
 Postal Code

**DETAILS OF YOUR PARENT/GUARDIAN/NEXT OF KIN (COMPULSORY)**

Surname

ID/Passport Number

First Names (As stated on ID/Passport)

Area Code  Home Telephone Number

Title (Please tick ✓)  
 MR  MRS  MS

Area Code  Work Telephone Number

Relationship to applicant:  
 Parent   
 Guardian   
 Next of Kin

Mobile Phone Number

Physical Address   
  
 Postal Code

E-Mail Address

Postal Address (if different from physical address)   
  
 Postal Code

**PLEASE TURN OVER**

