

# IBS Special Centre Form

## IMPORTANT NOTICE

Incomplete form or required documents not attached will delay the enrolment process

Please note that the normal enrolment process and fees are still applicable including an additional administration fee of R550

### Other Documents

- Proof of payment - R550-00
- CV of Invigilator
- Proof of payment for registration and examination

### Other information

- I understand that I am responsible for paying the invigilator and the return courier
- Ensure that you signed this special centre form and completed in full

Mail to IBS at PO Box 331, Wits 2050

PLEASE PRINT IN BLACK INK



INSTITUTE OF BUSINESS STUDIES

## Applicant Details

### Student Information

Student Number:

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Title:  Ms  Mrs  Miss  Mr  
 Dr  Prof  Rev  Adv

Surname:

Full Names:

Initials:

Gender  M  F

Nationality

#### FOR STATISTICS PURPOSES ONLY

Population Group:  African  Asian  
 Coloured  White

Home language:

Disability:  Sight  Hearing  
 Communication  Physical  
 Intellectual  Other  
 Emotional

Proof of disability (e.g. medical certificate, psychologist's report) must be provided.

Identity Number:

Passport Number:

(if no ID number was completed)

Date of Birth:

Highest School Qualification:

Grade  Year Completed:

### Employment/Occupation

Employer

Position held:

Tuition Provider:

Postal Address Line 1:

Postal Address Line 2:

Suburb:

City:

Province:

Postal Code:

Country:

Home Number:

Work Number:

Cell Number:

Fax Number:

Email:

### Modules for which I require a special centre

Level 3	
	Introduction to Business English
	Introduction to Mathematics for Business
	Introduction to Accounting
	Introduction to Governance
	Introduction to Office Administration and Information
	Introduction to Business Principles and Human Resources
Level 4	
	Fundamentals of Business English
	Fundamentals of Mathematics
	Fundamentals of Accounting
	Fundamentals of Governance
	Fundamentals of Entrepreneurship
	Fundamentals of Office Administration

### Payment Options

Credit Card  Cheque  Direct Deposit  Other

Number of Module(s)	Type	Amount
	Registration	R320
	x R290 (per module)	
Once-off	Administration Fee	R550
	<b>Total</b>	
	<b>Amount Paid Now</b>	

### Credit Card Payment

Please charge to my  Visa  Master Card  Other

Account Number:

CV Number (last 3 digits on the back of the card):

If on "Budget Account", number of months:

Expiry date:

Card Holder Name

Card Holder's Signature

### Deposit/Cheque Payment

Deposits/Cheques must be made payable to:

Account holder: IBS  
Bank details: Standard Bank  
Branch name: Braamfontein  
Branch code: 00 48 05  
Account number: 00 289 778 4

Reference: Surname and Student Number **[COMPULSORY]**

## Declaration

**I understand that I am responsible for paying the invigilator and the return courier of the script - which will be received by ICSA HO (Braamfontein) no later than the Tuesday after the last day of the examination. I have read the Institute's prospectus, and agree to comply with the rules contained therein. I acknowledge that any non-compliance will result in forfeiture of rights that would normally be due to me. I furthermore acknowledge that the Institute is not a tuition provider and therefore I cannot hold the Institute liable for the content or presentation of tuition material.**

I specifically note the terms and conditions contained in the prospectus and related Institute material in hard and soft copy, pertaining to:

1. Registration as a private candidate
2. References throughout the prospectus to the Institute's role and responsibilities, especially with regard to limitations of support, NQF status, provisions of syllabus and curriculum outlines, the role of prescribed and recommended texts and text books as well as study guides, and my responsibility as a student.
3. The final decision and authority of the Chief Examiner
4. The use of the correct and appropriate channels for communication and appeals.
5. The Institute and its subsidiaries make no claims whatsoever regarding the guarantee of jobs or emigration/immigrations points or benefits.
6. That all services and examination/course results are ONLY obtainable on full payment of all fees due - in advance, with no refunds payable.
7. That the onus is on me to provide clear and unambiguous proof of such payments.
8. All other information contained in the prospectus and related hard and electronic copies of pertinent materials relating to my responsibilities and duties as a student.

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**Signature**

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**Date**