

"Each natural science student – a critical scientist, creative thinker and problem solver"

## APPLICATION FORM

Return the completed form (by mail or e-mail) to reach us on/before 16 May 2017.

Information regarding student

Name and Surname					
Grade		School			
Gender		Language preference	Afrikaans		English
Postal Address					
e-mail address				Tel no (home)	
(If available)				Cell no	
School Subjects	Mathema	atics			
(Mark those you take)	Physical S	cience			
	Life Scien	ce			

## Information regarding parent/quardian

I would like to enter my son/daughter for the Winter Week from **Sunday 2 July to Thursday 6 July 2017**. <u>I undertake to pay the course fee of **R 1800** before/ on **6 June 2017**.</u>

Name of Parent/ Guardian:	
Signature of Parent/ Guardian: _	
Date:	

• Payment can be made by cheque, deposit slip or bank transfer. <u>Use **R416** as reference number</u>, as well as the name of the learner. Please email proof of bank payment to us and write your name on the slip as reference.

## **Bank details**

All cheques must be made out to "Stellenbosch University"

Standard Bank Stellenbosch

Branch number 050610
Account number 073006955

Write you name on the slip as reference

## **ENQUIRIES AND APPLICATIONS TO:**

Mrs M van den Worm
Director: Faculty Management Science Faculty
Al Perold Building R2013
Stellenbosch University
Private Bag X1
MATIELAND 7601

e-mail: mvdworm@sun.ac.za

Tel: 021 808 3760