







752 Park St, Arcadia

GRADUATION INFORMATION: STELLENBOSCH UNIVERSITY MARCH 2024

To ensure the hiring of your graduation attire runs smoothly, please carefully follow the steps below:

| STEP 1 | Pay Hiring Fee or Purchasing Price via EFT in advance. See pricing below & bank details on page 2. |
|--------|---|
| STEP 2 | Print Proof of Payment. |
| STEP 3 | Fill in and print Hiring Form. Page 2 of this document. |
| STEP 4 | Bring completed Hiring Form and Proof of Payment to your graduation ceremony. |
| STEP 5 | Pay hiring deposit in CASH at the ceremony. See Hiring Prices below. |

Hiring Prices:

| Options | Hiring Price (EFT in advance) | Deposit (Cash at venue) | Total |
|---|----------------------------------|----------------------------|----------------------|
| Full Outfit: | R290 | R300 | R590 |
| PhD Outfit: Gown Only: Hood Only: | R410 R280 R100 | R500 R300 R300 | R910 R580 R400 |

Purchasing Prices:

| Degree Gown: R1250 Diploma Hood: R380 Bachelors Hood: R460 | Doctorate Gown: Doctorate Hood: | R4000 R700 | |
|--|------------------------------------|---------------|-------|
| Honours Hood: Masters Hood: | R480 R650 | Total: | R4700 |





Arts & Social Sciences:

AgriSciences:





Science:

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HIRING FORM: STELLENBOSCH UNIVERSITY MARCH 2024 Personal Details:

Date of Ceremony: Full Name: _____ Contact Number: _____ Alternative Contact Number: _____ Email Address: Please tick the relevant Faculty

Engerneering: Theology: Military Science: Economic & Management Sciences: Law: Education: Please write your level of qualification (Eg: Bachelors, Honours, etc):

Banking Details:

: FNB Bank

: Dippenaar & Reinecke Account Holder

:6201 999 8791 Account Number : 252 145 Branch Code : Cell Number Reference

Medicine & Health Sciences:

NB: Pay hiring price in advance via EFT and deposit in cash at the venue.

Terms & Conditions:

I, the undersigned, herewith undertake to return the hired academic wear within 1 (one) hour after my ceremony where after my deposit will be refunded to me.

I accept the responsibility to pay the entire replacement value, plus legal costs if my attire is not returned as stipulated.

| Signature: | Date: | |
|------------|-------|--|