

**PRETORIA CAMPUS**

250 Pretorius Str
250 Pretorius Building

Tel: +27 (0) 12 323 5962
Cell: +27 (0) 82 269 5811

BRONKHORSTSPRUIT CAMPUS

30 Cornelis Street
Bronkhorstspuit, 1020

Tel: +27 (0) 13 932 2358
Cell: +27 (0)76 126 3087



www.techniconsa.org.za
applications@techniconsa.org.za

2026/27 REGISTRATION FORM

A: PERSONAL DETAILS

TITLE:	☐ Mr	☐ Mrs	☐ Miss	☐ Dr	☐ Prof	☐ Other.
SURNAME:						
FULL NAMES:						
DATE OF BIRTH:						
ID/PASSPORT NO:						
HOME LANGUAGE:						
POSTAL ADDRESS:						
	Code:					
PHYSICAL ADDRESS:						
	Code:					
CELLPHONE NO:						
HOME TEL NO:						
WORK TEL NO:						
E-MAIL ADDRESS:						

ANY CHRONIC DISEASE/DISABILITY: YES ☐ NO ☐ IF YES, PLEASE SPECIFY.....

B: DETAIL OF COURSE REGISTERED FOR

B1: NAME OF COURSE:																
B2: 2 ND COURSE OPTION:																
B3: DURATION	☐ CERTIFICATE	☐ DIPLOMA	☐ MATRIC	☐ MATRIC AMENDED												
B4: DURATION	☐ 4 MONTHS	☐ 6 MONTHS	☐ 1 YEAR	☐ 18 MONTHS	☐ 2 YEARS	☐ 3 YEARS										
B5: STUDY METHOD	☐ Full Time	☐ Distance	☐ Evening Classes	☐ Saturday Classes	☐ Online Classes											
B: 1 st Exam	2 nd Exam				3 rd Exam											

.....		
.....		
.....		
.....		

C: INFORMATION OF PREVIOUS SCHOOLING/EDUCATION

NAME OF SCHOOL:																
QUALIFICATION:																
YEAR OBTAINED:																

D: DETAILS OF PARENT, GUARDIAN OR NEXT OF KIN

SURNAME:																					
FIRST NAMES:																					
RELATIONSHIP:																					
CONTACT NO:											OTHER TEL NO:										
EMAIL ADDRESS:																					

E: DETAILS OF PERSON RESPONSIBLE FOR PAYMENT OF FEES

WHO IS GOING TO PAY YOUR ACCOUNT?

☐ Parent/Guardian	☐ Employer	☐ Bursary	☐ Self
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DETAILS OF PERSON RESPONSIBLE FOR PAYMENT OF FEES ACCOUNT:

SURNAME/COMPANY NAME:																					
FIRST NAMES:																					
ID NUMBER/COMPANY REG:																					
POSTAL ADDRESS:																			Code:		
PHYSICAL ADDRESS:																			Code:		
CONTACT NO:											OTHER TEL NO:										
EMAIL ADDRESS:																					

F: WHERE DID YOU HEAR ABOUT TECHNICON SA?

☐ Billboards	☐ School Visits	☐ Website	☐ Friend	☐ Facebook	☐ Instagram
☐ Relative	☐ Consultants	☐ Pamphlets	☐ Former Student	☐ Twitter	☐ Whatsapp

G: PAYMENT OPTIONS

☐ Debit Order	☐ Cash Payment Prior to Course Commencement	☐ Monthly payments Date...../...../.....
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H: INDEMNITY AGAINST CLAIMS OF LOSS/DAMAGES

I _____ (Full Names and Surname), the undersigned, hereby declare that I shall not lay any claim of any nature whatsoever against **TECHNICON SA**, or any of its employees acting within the scope and capacity of his/her duties or shall in any way whatsoever hold **TECHNICON SA** responsible for any loss or damage that I may suffer in person or in respect of any personal property or injury that I may suffer in person which may directly or indirectly arise from my commitment as registered student at **TECHNICON SA** resulting from any act whatsoever during the full period of my tuition and/or practical training, or during any sport activity that I undertake, or during any trip or journey that I on my own responsibility, and voluntarily taking on any risk I may expose myself to in connection with any such activity. **I also undertake to report any attempts of any staff member to involve me in any personal and/or social activity with him/her, and that I shall not take part in any of such unprofessional behaviour.**

Furthermore, I declare that in case I am injured in such a manner that I cannot personally give consent to any medical treatment or medical intervention that I may be in dire need of, the responsible representative of **TECHNICON SA** may give such requisite consent and he/she shall not be liable for any ambulance costs or loss/damages of any property that I may subsequently suffer of. I confirm that I will be directly liable for any ensuing medical costs in this regard and undertake to settle any related account promptly with the relevant medical providers.

Applicant's signature:..... Date:...../...../.....

I: DECLARATION OF ACCOUNT PAYER

I _____ (Full Names and Surname) do accept full responsibility for the payment of the tuition fees to the fullest amount for the applicant named _____ and accept that this stands in binding me. **I confirm that all payments will be made on or before the 1ST of each month.** I further agree that **failure due to whatever reasons by the student to attend lectures, tests, examinations or any activity** will **NOT** reduce my responsibility to pay the applicable fees in full.

I undertake to pay the tuition fees in consecutive monthly instalments and I am fully aware that all applicable fees must be paid in full before the submission of term marks. I am also equally aware that **TECHNICON SA** reserves the right to refuse the Applicant to write examinations and/or withhold results until all outstanding fees have been paid in full or satisfactory arrangements have been made for the settlement of such outstanding fees. I also agree that a penalty of 10% and additional admin costs will be added to any outstanding fee. **ALL FOREIGN STUDENTS ARE REQUIRED TO PAY 50% OF THE TOTAL TUITION FEES AT THE TIME OF REGISTRATION. PROOF OF REGISTRATION WILL ONLY BE ISSUED UPON RECEIPT OF THIS PAYMENT.**

Applicant's signature:..... Date:...../...../.....

J: DECLARATION BY APPLICANT

I..... (Full Names and Surname) certify that the information given in this application form is true and correct and given in absolute good faith. **I further confirm that if I am not a South African citizen I will submit proof that I have been lawfully admitted in the country and have the relevant valid documentation.**

I understand that I will receive quality education and excellent training service aligned to the National Qualifications Framework (NQF) and that the course I have registered for falls under the **FURTHER EDUCATION AND TRAINING (FET)** band. **I am aware that I am responsible for making sure that I am registered for the exam and for the correct subjects.**

In the event that I do not complete my studies or wish to cancel my registration for whatever reason, I understand that I will comply with the cancellation procedure as stated in the Refund and Student Guarantee Policy. I am aware of and understand that I am bound by the Rules and Regulations of **TECHNICON SA**

Applicant's signature:..... Date:...../...../.....

K: DISPUTE RESOLUTION

Should any dispute, except in respect of outstanding payments, arise at any time regarding the terms contained herein which the parties are unable to resolve amicably, then such dispute shall be submitted to mediation or arbitration before any legal action is taken. Except as may be expressly provided for otherwise, the mediation or arbitration proceedings shall be conducted in accordance with the applicable laws of the Republic of South Africa. The mediation or arbitration proceedings shall be held on an informal basis, it being the primary intention of the parties that a decision should be reached as expeditiously and as inexpensively as possible, subject only to the due observance of the principles of justice and the rule of law. Should the dispute be mainly of a legal nature, then the mediator or arbitrator shall be an independent practising attorney with no less than 10 (TEN) years' experience, or a senior advocate as agreed upon by the parties, and failing such agreement, a person nominated by the Mediation Centre falling under the auspices of the Institute of Directors. This Clause shall constitute each party's irrevocable consent to any mediation or arbitration proceedings and neither party shall be entitled to withdraw from such proceedings or to claim that it is not bound by the provisions of this Clause

L: REFUND, CHANGE OF COURSE AND GUARANTEE POLICY

- Any Withdrawal from or cancellation of course must be made in writing stating all the reasons for withdrawal or cancellation.
- Any withdrawal or cancellation of course by the student, parent or employer made after the commencement of the course will affect the full course fee.
- Withdrawal from or cancellation of a course by the student or employer made at least 7 working days before commencement of the course: 80% of course fees paid will be refundable excluding the Admission and Registration fee.
- Withdrawal from or cancellation of course by the student or employer made within 5 working days before commencement date of course will incur 50% of cancellation fee (Admission fee is non-refundable).
- All students enrolled at **TECHNICON SA** are covered under our surety guarantee in terms of regulation 1, annexure 4 in government notice R101 in Government gazette 28121, 11th October 2005 under the further education and training act (act no.98 of 1998)
- For further information please refer to student code of conduct.

M. CERTIFICATION

- a) N1-N6 Certificates are issued by the Department of Higher Education and Training upon passing subject at that level or qualification.
- b) NQF aligned or Seta's Certificates or Diplomas are issued by the Seta concern upon completion of full qualification or Unit standard.
- c) Diplomas are also issued by the National Department of Higher Education and Training on successful completion of N6 and relevant working experience of 18 months for Management courses and 2 years for Engineering Courses.
- d) Certificates are handed to students at a formal graduation ceremony held in May and October annually.
- e) A fee of R500 shall be charged on collection of any Subject Certificate, Full Qualification Certificate and or Diploma as Umalusi and DHET charge the institution for every certificate issued.
- f) Certificate or Diploma must be collected at the Technicon, no certificate or diploma will be sent via courier, email or post, must be collected personally by the student.

N. POPIA CONSENT CLAUSE

I, the undersigned, acknowledge that by completing and submitting this registration form I am providing Technicon SA with my personal information as defined in the Protection of Personal Information Act, 4 of 2013 ("POPIA")

Applicant's signature:..... Date:...../...../.....

O. THE FOLLOWING MUST ACCOMPANY THIS DULY COMPLETED REGISTRATION FORM:

- 1. Certified copy of Applicant's Identity Document
- 2. Certified copy of previous results [report, statement of results or certificates]
- 3. Non-Refundable Admission fee of R _____
- 4. 1 x passport-size photo of the Applicant
- 5. Certified copy of Account Payer's Identity Document
- 6. Account Payer's Proof of Income

All tuition fees may be paid into the following bank account details of the Academy:

Name of Accountholder: TECHNICON SA(PTY) LTD
Reference: Student's initials and surname
Name of Bank: FNB Bank
Branch Name: Bronkhorstspuit
Branch code: 270 350
Account no: 6237 0651 442
Reference: Student Name & Surname
Email Proof to: applications@techniconsa.org.za

I, _____ declare that I have received career counselling with regard to the desired number of subjects, the entrance level, and the date on which examinations are to be written.

Signature (Student)

Signature (Parent/ Guardian)

FOR OFFICIAL USE ONLY

DOCUMENTS HANDED IN (Tick only where applicable)	
Copy of Senior Certificate	
Copy of other relevant results	
Copy of Statement of Results	
Copy of ID (Applicant)	
Passport Sized Photo (Applicant)	
Copy of ID (Account Payer)	
Proof of income (Account Payer)	

Student Number Allocated	
Registration Fee	
Admission Fee	
Receipt Number	
Date of Registration	
Official Name	
Official Signature	