Calvary University 2ND. YEAR.

Student Registration Payment Record

Provided upon first registration: always refer to this number

CU student number: | | | | | | |

CAP student number: | | | | | | |

This is a record of registration and payment made into the following account:

I hereby indicate my decision that I wish to be registered as a student at **Calvary University**. I am familiar with the possibilities of studying in a specific direction with a study group as required by CU and am satisfied with these arrangements.

I realise that no study group, Centre or Higher Institution represents Calvary University. Assistance given is offered to me as a private individual.

(These names without a title will appear on the certificate)

Student full ID Names: _____

(Surname, name on cert.) ☐

Student Surname: _____ Title: _____

Identification No.: | | | | | | | | | | | | | (ID/Passport)

Postal Address: _____

Town & Country: _____ | | | | | Postal Code

My highest qualification is: _____

Programme registering for: | | | | |

Centre Name & Code: _____ | | |

Tutor Name & Code: _____ | | | | | | |

Registration Fee Paid: R 250-00 fixed by agreement

Student personal e-mail: _____ @ _____

Student Cell/Tel numbers : (_____) _____ _____

Completed by (Print name): .....

Signed: ..... Date .....

NB: This is a payment record for a Calvary University programme. This document must be faxed to the CU fax no when payment is made.