



# Application for student admission to the Institute Academic year: 2020

**Please complete this form and return it to:**

I-Care Health Training Institute, (Windhoek Campus - NO. 69, New Castle Street, Northern Industrial, Tel: +264 85 2323230) OR (Ondangwa Campus – Block C, Punyu Hotel, Oniipa Main Road, Tel: +264 85 2323231); P.O.Box 50986, Bachbrecht; email: [info@icare-health.org](mailto:info@icare-health.org) ; Website: [www.icare-health.org](http://www.icare-health.org)

**Note:**

- Applications can take up to five working days to process.
- This form can either be hand delivered, emailed or posted to us, together with the required supporting documents.
- Correspondence with the applicant will mainly be by email/telephone, make sure these details are indicated clearly.
- All sections of this form must be completed in full (use block letters) as necessary. Failure to do so will result in your form not being considered.

**DUE DATE: 06 December 2019**

<b>Intended study programme</b>
<b>CERTIFICATE IN ENROLLED NURSE AND MIDWIFE / ACCOUCHEUR (NQF LEVEL 6)</b>

<b>Section A – Applicant details</b>
--------------------------------------

<b>Personal details</b>												
<b>Title</b>	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/>						<b>Other (please specify)</b>					
<b>First name</b>					<b>Middle name(s)</b>							
<b>Surname</b>												
<b>Gender</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>											
<b>ID Number</b>												

<b>Current residential address</b>												
<b>Erf number and Street name</b>												
<b>Postal city/town</b>		<b>Postcode</b>										
<b>Suburb</b>		<b>COUNTRY</b>										
<b>Telephone number</b>		<b>Area code</b>			<b>Number</b>							
<b>Mobile number</b>		<b>Area code</b>			<b>Number</b>							
<b>Email Address</b>												
<b>Current employment address</b>												

If you are currently unemployed please tick here	<input type="checkbox"/>
--	--------------------------

<b>Company name</b>			
<b>Position/Job title</b>		<b>Department</b>	
<b>Company address</b>			
<b>Postal city/town</b>		<b>Postcode</b>	
<b>Suburb</b>		<b>COUNTRY</b>	
<b>Telephone number</b>	<b>Area code</b>		<b>Number</b>
<b>Mobile number</b>	<b>Area code</b>		<b>Number</b>
<b>Work email address</b>			

**Section B – Education and Qualifications**

Please give your full education history with the qualifications awarded.

- You must provide proof (*certified copies*) of all qualifications with your application.
- Certificates in any language other than English must be accompanied by certified English translations.

University education			
<b>Level</b>	Degree <input type="checkbox"/>	Certificate <input type="checkbox"/>	
<b>University attended</b>			
<b>Qualification</b>			
<b>Date obtained</b>			

Secondary/ High School education			
School attended	Subject/ Module name	Grade /Symbol	Date obtained

**Section C – Application fee payment**

The non-refundable application fee must accompany this application. Applications submitted without the necessary fees will not be processed. Fees accepted in Namibia Dollar only. A double application fee is payable for applications handed in after the due date.

Namibian students	SADC students	Non-SADC students	<b>A late application fee of N\$ 50-00 is added when the application form is submitted after the 06 December 2019.</b>
N\$ 250 - 00	N\$ 450 - 00	N\$ 650 - 00	<i>This is a once-off payment payable on initial application.</i>

If application fee payment is made via bank deposit or transfer, tick box below and attach proof of payment or deposit slip.

<input type="checkbox"/>	<b>Bank transfer/deposit</b>	Please enter the total amount of Bank transfer	N\$
--------------------------	------------------------------	--	-----

Bank transfer / deposits should be made to the following account:

Account name	TRAVCARE INVESTMENTS	Bank Name	BANK WINDHOEK
Account number	8006065441	Branch name	WALVISBAY
Branch code	481872	Use student initials and surname as reference on deposit slip	

Postal order and/ or Cheque method of payment NOT accepted.

**Section D – Guardian/ Person responsible for paying student’s tuition fees**

Title	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/>	Other (please specify)	
First name		Middle name(s)	
Surname			
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Relationship to student	
ID Number			

<b>Current residential address</b>			
Erf number and Street name			
Postal city/town	Postcode		
Suburb	COUNTRY		
Telephone number	Area code	Number	
Mobile number	Area code	Number	

<b>Current employment address</b>	
If you are currently unemployed please tick here	<input type="checkbox"/>

<b>Company name</b>			
<b>Position/Job title</b>		<b>Department</b>	
<b>Company address</b>			
<b>Postal city/town</b>		<b>Postcode</b>	
<b>Suburb</b>		<b>COUNTRY</b>	
<b>Telephone number</b>	<b>Area code</b>		<b>Number</b>
<b>Mobile number</b>	<b>Area code</b>		<b>Number</b>
<b>Work email address</b>			
<b>Signature of person responsible for student's account</b>			

**Section F – The applicant’s declaration**

This section must be signed by applicant.

I..... (full name) hereby declare that the information provided in this application form (including supporting documents attached), is authentic and not tempered with in any sense.

<b>Name (BLOCK LETTERS)</b>			
<b>Signature</b>		<b>Date</b>	

<b>Please complete the following CHECK-LIST</b>	
I have enclosed <b>certified copies of all required education certificates</b>	<input type="checkbox"/>
I have provided an appropriate <b>method of payment</b> for the application fee (cash/ bank transfer/ deposit)	<input type="checkbox"/>
I have signed and dated the <b>applicant’s declaration</b>	<input type="checkbox"/>
Indicate whether you have obtained the requirements for admission onto this study programme: <b>1. Grade 12, 20 points in six subjects, C symbol in English</b>	<input type="checkbox"/>

<b>FOR OFFICIAL USE ONLY</b>		
<b>APPLICATION STATUS</b>		
<b>SUCCESSFUL</b>	<b>WAITING LIST</b>	<b>UNSUCCESSFUL</b>
<b>STUDENT NUMBER</b>		<b>SIGNATURE</b>