

# Application Form 2024: Graduate Programmes

- FPD undertakes to collect and process your personal information in accordance with the requirements of the Protection of Personal Information Act, 4 of 2013.
- Certain student information is required to enable FPD to report on student achievements to the authorities as required. We appreciate your assistance in ensuring that our records are complete.

PROGRAMME NAME							
TITLE		INITIALS		FULL NAME(S)			
PREFERRED NAME				SURNAME			
GENDER				ETHNICITY			NATIONALITY
ID NUMBER/PASSPORT NUMBER							
DATE OF BIRTH							
LIST OF HIGHEST QUALIFICATION AND OTHER QUALIFICATION TO MEET MINIMUM ENTRY REQUIREMENT							
CURRENT OCCUPATION							
PROFESSION							
ORGANISATION EMPLOYED AT							
WHAT PROFESSIONAL COUNCIL ARE YOU REGISTERED WITH?				PROFESSIONAL COUNCIL NUMBER			
IN WHICH ONE FUNCTIONAL AREA DO YOU SPEND MOST OF YOUR WORKING DAY?		SALES/MARKETING EDUCATION		RESEARCH CLINICAL		MANAGEMENT ADMIN/SUPPORT	
SELECT THE ONE SECTOR THAT BEST DESCRIBES YOUR MAIN WORKPLACE		NGO		FBO (FAITH BASED)		PRIVATE SECTOR	
SELECT YOUR MAIN AREA OF WORK		URBAN AREA		RURAL AREA		PERI-URBAN AREA	
		PROVINCE				DISTRICT	
CONTACT DETAILS		WORK		HOW DID YOU HEAR ABOUT THE COURSE?			
		HOME		WORD OF MOUTH		SAMA INSIDER	
		CELL		PROFESSIONAL		E-MAIL	
		E-MAIL		LINKEDIN		JOURNAL	
		ALTERNATIVE E-MAIL		MAGAZINE		CONFERENCE	
				ADVERTISEMENT		INSTAGRAM	
				OTHER		SMS	
POSTAL ADDRESS							
		AREA				TOWN	
		COUNTRY				CODES	
PHYSICAL ADDRESS							
		AREA				TOWN	
		COUNTRY				CODES	
DO YOU HAVE ANY FORM OF DISABILITY?		NO	YES	IF YES, PLEASE SPECIFY			
DO YOU NEED ANY SPECIFIC ADDITIONAL SUPPORT?		NO	YES	IF YES, PLEASE SPECIFY			

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## REQUIRED DOCUMENTATION

**APPLICANTS ARE REQUIRED TO SUBMIT THE FOLLOWING DOCUMENTATION TOGETHER WITH A R350.00 NON-REFUNDABLE APPLICATION FEE, TO [gradprog@foundation.co.za](mailto:gradprog@foundation.co.za):**

- COMPLETED APPLICATION FORM.
- CERTIFIED COPY OF SOUTH AFRICAN IDENTITY DOCUMENT (SOUTH AFRICAN RESIDENTS ONLY) / OFFICIAL PASSPORT (FOREIGN STUDENTS).
- CERTIFIED COPY OF HIGHEST QUALIFICATION CERTIFICATE AND ANY OTHER CERTIFICATION REQUIRED AS PROOF OF MEETING MINIMUM ENTRY REQUIREMENTS FOR THIS PROGRAMME.
- PROOF OF PAYMENT OF NON-REFUNDABLE APPLICATION FEE OF R350.00.
- SAQA AND USAF VERIFICATION AS REQUIRED FOR VERIFICATION OF RECOGNITION OF FOREIGN QUALIFICATIONS.
- RECOGNITION OF PRIOR LEARNING (RPL) FORM FOR ACCESS AND/OR CREDIT ALLOCATION TRANSFER (CAT), IF APPLICABLE.
- PROOF OF REGISTRATION WITH HEALTH PROFESSIONS COUNCIL OF SOUTH AFRICA (HPCSA) OR EQUIVALENT COUNCIL FROM FOREIGN COUNTRY (IF APPLICABLE).

**THE FOLLOWING SUPPORTING DOCUMENTATION MUST BE INCLUDED IF YOU ARE APPLYING FOR CAT:**

- CERTIFIED ACADEMIC TRANSCRIPT(S) OF TRAINING FROM A PREVIOUS EDUCATIONAL INSTITUTION OR FPD AT SAME NQF LEVEL.
- STUDY GUIDE THAT SUPPORTS THE CREDIT CLAIM AT SAME NQF LEVEL.

**THE FOLLOWING SUPPORTING DOCUMENTATION MUST BE INCLUDED IF YOU ARE APPLYING FOR RPL:**

- TESTIMONIALS/REFERENCE LETTER FROM PREVIOUS OR CURRENT EMPLOYERS.
- PORTFOLIO OF EVIDENCE THAT IS EVIDENT OF YOUR WORK EXPERIENCE AND SKILLS EQUIVALENT TO A NQF LEVEL.
- FULL CURRICULUM VITAE INDICATING EMPLOYMENT HISTORY AND WORK EXPERIENCE IN RELEVANT FIELD.
- PORTFOLIO OF EVIDENCE OF RESEARCH PROJECT (IF APPLICABLE).

\*CERTIFIED DOCUMENTS SHOULD BE CERTIFIED BY A COMMISSIONER OF OATHS. A STAMP BY YOUR ACADEMIC INSTITUTION IS NOT SUFFICIENT.

**PAYMENT DETAILS: FPD ONLY ACCEPTS ELECTRONIC PAYMENTS VIA PAYFAST OR CASH DEPOSIT. NO CASH OR CHEQUES WILL BE ACCEPTED.**

PAYMENT OPTION	FULL PAYMENT	PAY PER MODULE
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## DETAILS FOR INVOICING

NAME OF PERSON/ORGANISATION TO INVOICE	
NAME OF CONTACT PERSON (IF AN ORGANISATION IS INVOICED)	
VAT REGISTRATION NUMBER (IF APPLICABLE)	
POSTAL ADDRESS	
CONTACT DETAILS (EMAIL AND CONTACT NUMBER)	

## FPD BANKING DETAILS

FPD BANKING DETAILS:  
NEDBANK  
BRANCH: COMMERCIAL PRETORIA  
BRANCH CODE: 14 97 45  
ACCOUNT NUMBER: 1497 046 238  
PLEASE REFERENCE YOUR PAYMENT AS FOLLOWS: SURNAME & NAME OF PROGRAMME

## TERMS AND CONDITIONS

### WITHDRAWAL FROM THE PROGRAMME PRIOR TO COMMENCEMENT

- THE STUDENT MUST NOTIFY FPD IN WRITING OF THE STUDENT'S REQUEST FOR WITHDRAWAL AND ATTACH A LETTER OF MOTIVATION.
- NO FURTHER FEES OR PENALTIES WILL APPLY TO THE STUDENT INFORMING FPD OF THEIR INTENTIONS TO WITHDRAW STUDIES AT LEAST FOURTEEN (14) DAYS PRIOR TO THE COMMENCEMENT OF THE FIRST ACADEMIC SESSION OF THE PROGRAMME AND THE STUDENT SHALL BE ENTITLED TO A FULL REFUND IN THE EVENT THAT NO EXPENDITURE HAD BEEN INCURRED BY THE FPD.

### WITHDRAWAL FROM THE PROGRAMME AFTER COMMENCEMENT

- THE STUDENT MUST NOTIFY FPD IN WRITING OF THE STUDENT'S REQUEST FOR WITHDRAWAL AND ATTACH A LETTER OF MOTIVATION.
- WITHDRAWAL SETTLEMENT FEES MAY APPLY AND WILL BE CONFIRMED IN WRITING BY FPD.
- STUDENTS WHO HAVE PROVIDED UPFRONT PAYMENT FOR THE ACADEMIC YEAR CAN APPLY FOR A PRO RATA CREDIT OF THE FEES PAID, WHICH WILL CONSIST OF THE BALANCE DUE TO THE STUDENT AFTER DEDUCTIONS HAVE BEEN APPLIED FOR (BUT NOT LIMITED TO):
  - PAYMENT DUE FOR MODULES UP TO THE POINT WHERE THE WITHDRAWAL REQUEST RECEIVED.
  - THE VALUE OF ANY LEARNING MATERIAL OR REFERENCE MATERIALS SUPPLIED BY THE FPD IN ADVANCE.

I HAVE READ AND ACCEPT THESE TERMS AND CONDITIONS, **DATE:** \_\_\_\_\_ **SIGNATURE:** \_\_\_\_\_

## CONSENT

AS REGISTERED STUDENT YOU ARE ELIGIBLE TO BE INCLUDED IN OUR ALUMNI MAILING LIST FOR UPDATES AND/OR INFORMATION ON NEW COURSES. WOULD YOU LIKE TO SUBSCRIBE? **YES** **NO**

DURING YOUR COURSE YOU MAY NEED TO BE INVITED TO GROUP SESSIONS. PLEASE CONSENT TO FPD INCLUDING YOUR EMAIL ADDRESS ON INVITATIONS? **YES** **NO**

FPD AT TIMES USES WHATSAPP GROUPS TO ALLOW STUDENTS TO COMMUNICATE WITH EACH OTHER, FACULTY AND FPD STAFF ON COURSE SPECIFIC MATTERS. PLEASE CONSENT TO FPD INCLUDING YOU ON A COURSE SPECIFIC WHATSAPP GROUP? **YES** **NO**