

Application Form 2025: 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		PUBLIC 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	E-MAIL	FPD WORKSHOP			
	CELL				PROFESSIONAL	JOURNAL	X	FACEBOOK			
	E-MAIL				LINKEDIN	FPD WEBSITE	CONFERENCE	INSTAGRAM			
	ALTERNATIVE E-MAIL				MAGAZINE	ADVERTISEMENT	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:

- 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

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 PRIOR TO COMMENCEMENT OF THE QUALIFICATION

- FURTHER FEES WILL NOT APPLY TO STUDENTS INFORMING FPD OF THEIR INTENTIONS TO WITHDRAW STUDIES AT LEAST FOURTEEN (14) DAYS PRIOR TO THE COMMENCEMENT OF THE FIRST ACADEMIC MODULE OF THE QUALIFICATION AND THE STUDENT MAY BE ENTITLED TO A FULL REFUND IN THE EVENT THAT NO EXPENDITURE HAD BEEN INCURRED.
- THE STUDENT WILL BE LIABLE FOR THE INSTALMENT DUE SHOULD THE STUDENT NOT ADVISE FPD OF THEIR INTENTION TO WITHDRAW FROM THEIR STUDIES WITHIN THE STATED FOURTEEN DAYS.

WITHDRAWAL AFTER COMMENCEMENT OF THE QUALIFICATION

- STUDENTS ARE REQUIRED TO SUBMIT WRITTEN NOTICE OF THEIR INTENT TO WITHDRAW AND PROVIDE A LETTER OF MOTIVATION.
- STUDENTS WHO VOLUNTARILY WITHDRAW OR FAIL TO COMPLETE A MODULE AS PER THEIR PROVIDED TIMETABLE WILL NOT BE ELIGIBLE FOR A REFUND, IRRESPECTIVE OF THEIR PROGRESS OR COMPLETION STATUS. THE WITHDRAWAL REQUEST MUST BE RECEIVED 14 DAYS BEFORE THE START OF AN ACADEMIC MODULE OR THE STUDENT WILL BE DEEMED AS BEING ENROLLED AND THE FULL FEE FOR THE MODULE WILL BE DUE AND PAYABLE.
- STUDENTS WHO HAVE PROVIDED UPFRONT PAYMENT 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 IN ACCORDANCE WITH THEIR PAYMENT PLAN AND/OR TIMETABLE UP TO THE POINT WHERE THE STUDENT ADMINISTRATION AND ENGAGEMENT ADMINISTRATOR RECEIVES WRITTEN NOTICE OF THE STUDENTS REQUEST FOR WITHDRAWAL.
 - THE VALUE OF ANY MATERIALS AND/RESOURCES 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**