



SHAKALAND TECHNICAL COLLEGE

ENROLMENT FORM NATED ENGINEERING STUDIES

MECHANICAL ENGINEERING N4 – N6 FULL TIME

STUDENT NUMBER	
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TITLE	
SURNAME	
FIRST NAME/S	
ID NUMBER	
GENDER	M <input type="checkbox"/> F <input type="checkbox"/> DISABLED Y <input type="checkbox"/> N <input type="checkbox"/>
	(Specify disability)
STUDENT CELL	
LANGUAGE	
RACE	BLACK <input type="checkbox"/> INDIAN <input type="checkbox"/> WHITE <input type="checkbox"/> COLOURED <input type="checkbox"/>
NATIONALITY	SA <input type="checkbox"/> OTHER (SPECIFY)
MEDICAL HISTORY	
PARENT/GUARDIAN	
POSTAL ADDRESS	
RESIDENTIAL ADDRESS	
	PROVINCE <input type="checkbox"/> POSTAL CODE <input type="checkbox"/>
TEL. No	HOME <input type="checkbox"/>
PARENT	CELL <input type="checkbox"/>
COURSE	MECHANICAL ENGINEERING LEVEL N4 <input type="checkbox"/> N5 <input type="checkbox"/> N6 <input type="checkbox"/>
SUBJECTS	TICK <input type="checkbox"/> AMOUNT
MATHEMATICS	
ENGINEERING SCIENCE	
MECHANICAL DRAUGHTING	
MECHANOTECHNICS	
POWER MACHINES	
STRENGTH OF MATERIALS	
FLUID MECHANICS	
SUPERVISORY MANAGEMENT	
PRODUCTION AND QUALITY CONTROL	
CHEMICAL PLANT OPERATIONS	
INDUSTIAL AFFAIRS	
CHEMISTRY	
LOSS CONTROL	
	TOTAL
REGISTRATION FEES	
DEPOSIT	
BALANCE	

ENROLMENT OFFICER

SIGNATURE

DATE