



COURSE: POSTGRADUATE DIPLOMA IN PUBLIC HEALTH

S2 2019 ENROLMENT AWARD APPLICATION FOR NEW STUDENTS

(Application must be submitted on or before 30 August 2019)

DETAILS OF ENROLMENT AWARD			
<ul style="list-style-type: none"> 15% tuition fee discount on all modules enrolled for 2019 academic year The award is available to a limited number of students. The award will be revoked in the event that a student cancels his/her enrolment. Students who receive the enrolment award are not eligible for other discounts in addition to this award. The discount will be passed as a credit note on the student account at the end of Semester 2 2019. Application form must be submitted on or before 30 August 2019 to be eligible for the discount. 			
APPLICATION REQUIREMENTS			
<ul style="list-style-type: none"> The student must meet the entry requirements/be accepted for the 1st time to the PGDip in Public Health course in semester 2 2019. Enroll for a minimum of 2 modules per semester and pass each module on first attempt. The student must be self-sponsored and not sponsored by a company /organization. The full module fee must be settled before enrolment if the student is enrolling per module. Local students enrolling for a full load should pay 30% deposit relating to Semester 2 tuition fees before enrolment. To avoid delays obtaining a study visa, commencing international students must pay a 30% deposit by the latest 28 May 2019 to allow 6-8 weeks for study visa application to be processed and 50% balance on or before enrolment. The student's IIE MSA account must be in financial good standing - fees for completed modules during the previous teaching period should be settled as per the published payment due dates. 			
SECTION A: ACCOUNT PAYER DETAILS			
Title (Mr/Miss/Mrs/Ms):			
Name & Surname:			
ID/Passport No:			
Contact No (H):			
Contact No (Cell):			
E-mail:			
SECTION B: STUDENT DETAILS			
Student number:			
Title (Mr/Miss/Mrs/Ms):			
Name & Surname:			
Contact No (Cell):			
Personal E-mail:			
Course Code		Course Title	
I certify that I have read and agree to be bound by the application requirements set out above.			
Name & Surname: _____			
Signature: _____ Date: _____			
Office Use			
Received by:	Checked all requirements:	Award Value:	Date:
Approved by:			

Please return application to: E-mail: studyfinance@iiemsa.co.za
 Tel: +27 (0) 11 950 4461/4494 Fax: +27 (0) 11 950 4232