



LIMPOPO COLLEGE OF NURSING

APPLICATION FOR ADMISSION 2024- DIPLOMA IN NURSING: GENERAL (R.171 OF 8 MARCH 2013)



LIMPOPO PROVINCIAL GOVERNMENT REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH

A: PERSONAL INFORMATION (PLEASE Print)

\*(Certified copy of I.D. and Marriage Certificate must be attached)

A.1 Surname

Maiden Name (If Applicable)

A.2 Names

A.3 Identity No Date of birth

A.4 Are you a South African Citizen A.5 Gender A.6 Have you been convicted of criminal offence? A.7 Is there any criminal charges pending against you? A.8 Do you have a disability? A.9 Did you include a postal order A.10 Postal order number

B: HOW DO WE CONTACT YOU

B1: Residential Address B2: District Local Municipality Code

B:3 Name of Relative Tel No. Applicant's telephone no. Email address

C: ACADEMIC DATA (Certified proof must be attached)

C.1 Have you passed grade 12 with an exemption or bachelor's degree? C.2 In which year did you pass Grade 12? C.3 Do you have any post matric qualification? C.4 Indicate the qualification type e.g. Bachelor degree or National Diploma C5 Are you currently registered/studying with any institution of higher learning C6 Indicate the name of the institution and programme e.g. X University

D: DECLARATION

I declare that the above particulars and information given with my application is completed and true, and that I am aware that any purposeful withholding of information supplied by me could lead to immediate disqualification.

Signature of Applicant Date: