



REGISTRATION FORM

YEAR	2	0			
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REPORT 191 (NATED): HUMAN RESOURCES MANAGEMENT FULL TIME

Block	Description	Tick ONE (v)
S1	SEMESTER 1 (Jan – June)	
S2	SEMESTER 2 (Jul – Dec)	

Tick relevant Campus (v)					
Beaufort West Campus	02	Hessequa Campus	05		
Bitou Campus	03	Mossel Bay Campus	06		
George Campus	04	Oudtshoorn Campus	07		

STUDENT SURNAME		STUDENT INITIALS				
STUDENT NAMES						

STUDENT ID NUMBER										
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For office use:

STUDENT NUMBER										
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SUBJECT DESCRIPTION	SUBJECT CODE (SELECT SUBJECT CODE & LEVEL WITH A v)					
	NC4007 N4 50404015		NC5006 N5 50504013		NC6006 N6 50604016	
	Entrepreneurship & Business Management (<i>EBMANN4</i>)	4090304				
Personnel Management (<i>PMANN4/N5/N6</i>)	4110424		4110435		4110466	
Computer Practice (<i>CPRACN4/N5/N6</i>)	6030204		6030165		6030196	
Management Communication (<i>MCOMN4</i>)	5140364					
Personnel Training (<i>PERTRN5/N6</i>)			4110445		4110476	
Labour Relations (<i>LRELN5/N6</i>)			4110455		4110486	

Please note:

1. Exam admission is subject to the regulations of the:

DEPARTMENT OF HIGHER EDUCATION AND TRAINING (DHET) NATIONAL EXAMINATIONS DEPARTMENT.

2. I undertake to inform the Campus Administrative Officer of any changes regarding my personal details or change/cancellation of my Course.

Student Contact Number:										
Signature of Student:							Date:/...../20.....		