higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

South Cape TVET College
Suid-Kaap Kollege
Ikholeji yasemZantsi-Kapa

REGISTRATION FORM

YEAR	2	0		

REPORT 191 (NATED): TOURISM FULL TIME

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

Tick relevant Campus (√)					
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													

For office use:

STUDENT NUMBER										

SUBJECT DESCRIPTION	SUBJECT CODE (SELECT SUBJECT CODE & LEVEL WITH A √)					
	NC4010 N4 50422001		NC5009 N5 50522001		NC6009 N6 50622000	
Travel Office Procedures (TOPN4/ N5/ N6)	4021154		4021165		4021176	
Tourism Communication (TCOMN4/ N5)	5140184		5140195			
Tourist Destinations (TDN4/ N5/ N6)	22030044		22030115		22030086	
Travel Services (TSN4/ N5/ N6)	22030134		22030145		22030126	
Hotel Reception (HRECN6)					4061066	
Computer Practice (CPRACN4) (Optional under the Management Assistant Qualification)					06030204 (N4)	

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....