Appeals form - Admission

A. To be completed 1. Administration De	
Date of appeal	
Applciant Name	
Identity Number	
Campus	
Course	
 Describe the Nature efer to) 	re of your appeal against admission (attach any evidence that you may hav

To be completed by Campus Selection Committee

. Administration Detai	ls	
Date of meeting		
Student Name		
Identity Number		
Campus		
Course		
Members Present		
	used by the Committee	
Minutes of Selection Co		
Criteria used by the Car	npus	
On line application evic	lence – and correspondence	
Other	_	
	ıs Selection Committee- (attach :	any evidence that you may have or refer t
esolution of the campu	as selection committee (attach)	
esolution of the campu	as selection committee (actach)	
Resolution of the campu		
Resolution of the campu		

Signa	ture of Co	ommittee Members			
1.	Name		_		
2.	Name		_		
3.	Name				
4.	Name				