



PERSONAL DETAILS

Name: _____ Date: _____

Surname: _____ Age: _____

Date of Birth: _____ Student Number: _____

CONTACT DETAILS

Cell Number: _____ Email Address: _____

Address at Rhodes University: _____

DEGREE DETAILS

Degree Registered For: _____ Year of Study: _____

Subjects Registered For This Year: _____ Undergraduate: Postgraduate:

FIRST SEMESTER

SECOND SEMESTER

Credits Obtained: _____

SCHOOL RECORD

School Attended in Matric: _____

FAMILY BACKGROUND

Home Address: _____

Parents' Occupations:

Mother: _____

Father: _____

Sibling Information:

NAME	AGE	FIELD OF STUDY/OCCUPATION
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

CURRENT INTERESTS

What do you do in your leisure time? _____

What clubs or societies do you belong to? _____

CAREER PLANNING

What are your plans/career directions for your degree at present? _____

Please state how would you like us to assist you? _____

How would you like to attend your session?

Face to face:

Online:

Signature: _____