



**FACULTY OF LAW
BACHELOR OF LAWS DEGREE (LLB) (Internal Applicants)**

PLEASE COMPLETE THIS FORM IN BLOCK LETTERS

Student No:

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1. Application for admission in (year)

2. Surname: Title

First names:

3. Postal address:

..... Postal code:

Telephone numbers: Home (.....) Cell

Business: (.....)

Fax: (.....) E-mail address:

6. Academic record: *Please attach current academic transcript.*

SIGNATURE OF APPLICANT: DATE:

PLEASE NOTE:

Rhodes applicants will be advised as soon as possible of the Dean's decision. Offers of places must be accepted by 15 January, otherwise applications will lapse.

FOR OFFICIAL USE ONLY

STATEMENT BY THE DEAN OF THE FACULTY:

I APPROVE / DO NOT APPROVE acceptance in into the LLB degree course.

Year of LLB study:

Length of programme:

SIGNATURE:

DATE

DECLARATION AND AGREEMENT

I/We, the undersigned, hereby declare that:

To the best of my/our knowledge and belief the information furnished in this application is true and correct and that if it be found to be false, and misleading in any respect, this application may be invalidated and the applicant's registration terminated; and further agree.

That I/We accept liability for damage to University property howsoever caused by the Applicant and indemnify the University against any loss or damage howsoever caused in respect of property left at the University by the Applicant. I/We also indemnify the University against any claim whatsoever for damages howsoever caused or arising which the Applicant may sustain whilst registered as a student at the University, acknowledging that the Applicant's participation in any sporting or other activity at the University or conveyance of the Applicant in any University vehicle, shall be at the Applicant's sole and absolute risk. This indemnity shall be binding on the Applicant's Executors and Heirs.

That I/We acknowledge that a Minimum Initial Payment (MIP) is required by mid-January each year, including the first year of study, unless satisfactory arrangements have been made with the University. Details of the MIP amount will be included in future correspondence with the applicant:

That a statement signed by the Registrar (Finance) shall represent the amount owing to the University by me/us, and further that in the event of such amount being handed over for collection I/we shall pay all legal charges incurred on the attorney and client scale.

That I/We will pay interest on all overdue fees, and disbursements at the rate of 2% per month compounded monthly and calculated from the first day of each month following the date by which final payment of all fees and disbursements must have been made.

That I/We shall abide by all regulations of the University - and further that the applicant shall, if accepted, be under the disciplinary control of the University as from the date on which he/she takes up residence at the University or the day on which he/she commences studies or attends an orientation week or summer school or similar function or registers as a student, whichever is earliest, until the University accepts a notice of withdrawal from me/us or the applicant fails to renew his/her registration on the due date, whichever is the later.

That I/We accept and understand that the University keeps documents, including this Declaration and Agreement, electronically and distributes them as such. The University shall at all times be entitled to utilise such documents in electronic format for whatever purpose required and I/We agree that the electronically generated documents shall replace the originals signed by me.

That although the University does not take any responsibility for informing parents or guardian or major fee contributor of disciplinary action against a student (whether pending or finalized), academic performance or any other matters relating to the student, the University may in its discretion report to the parents or guardian or major fee contributor such breaches of the rules by the applicant as the University deems necessary and further to report on any matter concerning progress, conduct, well-being or health of the applicant, and further that the University may take all such steps as it considers reasonable in the event of the applicant becoming ill or requiring medical attention without the University undertaking any legal obligation to do so.

Signature of applicant: _____

Signature of person responsible for fees (if not applicant): _____

Date: _____