



# Graduate School

STUDENT NUMBER

Semester 1

Semester 2

I (student name and surname), \_\_\_\_\_

with student number:

acknowledge that I am registering after the registration closing date - \_\_\_\_\_

I have read the prospectus and I have read the calendar of events (**Initials**): \_\_\_\_\_

I am aware of my assignment due dates as well as the assignment submission procedure and I take full responsibility to ensure that I am prepared for my assignments. I accept that no extension will be given on the basis of late registration. (**Initials**): \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_

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**Cape Town Student Support Centre:** Level 3, Stadium on Main, Main Road, Claremont, Cape Town, 7708, P O Box 23998, Claremont, 7735, Tel +27 (0)21 671 4426, Email info.ct@immgsm.ac.za  
**Durban Student Support Centre:** 245 Peter Mokaba Road, Corner Valley View Road, Morningside, Durban, P O Box 35263, Northway, 4065, Tel +27 (0)31 312 2239, Email info.dbn@immgsm.ac.za  
**Edenvale Student Support Centre:** Stoneridge Office Park, Building B, 8 Greenstone Place, Greenstone Hill, Edenvale, 1610, P O Box 2780, Edenvale, 1610, Tel +27 (0)11 609 5003, Email info.greenstone@immgsm.ac.za  
**Milpark Student Support Centre:** 33 Frost Avenue, Braamfontein Werf, 2193, P O Box 91820, Auckland Park, 2006, Tel +27 (0)11 628 8029, Email info.milpark@immgsm.ac.za  
**Pretoria Student Support Centre:** 150 Anderson Street, Corner Jan Shoba Street, Brooklyn, Pretoria, 0181, Postnet Private Bag x 1, Menlo Park, 0102, Tel +27 (0)81 756 6016, Email info.pta@immgsm.ac.za  
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