



RHODES UNIVERSITY
Grahamstown • 6140 • South Africa

RE-REGISTRATION
For students not in attendance

MASTER'S AND DOCTORAL CANDIDATES

Please complete and return this form to the Registrar by **15 FEBRUARY**, in order to complete your re-registration.

YEAR:

STUDENT NUMBER:	DEGREE:	FACULTY:	ACADEMIC YEAR:
SURNAME:	FIRST NAMES:	ID OR PASSPORT NUMBER:	CITIZENSHIP:
RACE:	GENDER: (MALE/FEMALE)		

ADDRESSES:

HOME:
NEXT OF KIN:
ACCOUNT:
TERM:
E-MAIL: *Please note that the Registrar's Division has adopted e-mail as their primary method of communication with students. We will use @campus.ru.ac.za e-mail addresses for this purpose, and students using other addresses (yahoo, etc) are advised to ensure that their campus e-mail address forward to the other address. (Hard copies of such correspondence can be supplied on request to our office).

TELEPHONE NUMBERS:

HOME:
NEXT OF KIN:
CELL:
ACCOUNT:
TERM:

NEXT OF KIN:

SURNAME:	RELATIONSHIP:	TITLE:	INITIALS:
PHYSICAL ADDRESS:			
TELEPHONE NUMBERS:			

PLEASE NOTE: FORMS RECEIVED AFTER 15 FEBRUARY WILL INCUR A LATE REGISTRATION FEE

Date:

Signature: