

APPLICATION FORM
LAW SCHOOLS GLOBAL LEAGUE 3rd SUMMER SCHOOL - 6 to 17 JULY 2015
 UNIVERSITY OF CAPE TOWN, CAPE TOWN, SOUTH AFRICA



Personal details

Title:	Surname:	First name:
Full names (to appear on certificate):		
Date of birth:		
Citizenship:		
ID number/ passport number (please include a copy):		
Student number (if previously registered at UCT):		
Highest educational qualification:		
Occupation:		
Company, if working:		

The following information is required for UCT reporting purposes:

Gender: <input type="checkbox"/> M <input type="checkbox"/> F
Disability: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify:

Contact details

Postal address:	
	Postal code:
Home tel:	Cell:
Work tel:	Fax:
Email:	

Miscellaneous

Do you have any special dietary requirements? (Only religious reasons or allergies can be catered for.) Please be specific.	
Do you have any other special requirements that we should be made aware of? Please provide details.	
Do you require parking on campus?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you need information about accommodation? <i>You will be responsible for making your own bookings and settling your account at the reserved accommodation, Little Scotia, but we can also send you a short list of other accommodation options available in the area.</i>	<input type="checkbox"/> YES <input type="checkbox"/> NO

Signature: _____ Date: _____