Student Number												
NB: This AOD is strictly for the short learning p	rograi	nmes (	and N	OT at	plical	ble for	• form	al stud	ies!	11	SA	university

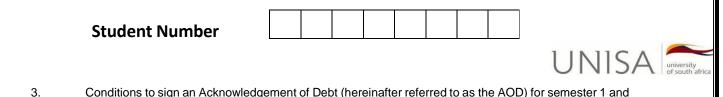
## UNISA Centre for Lifelong Learning (UCL) Short Learning Programmes ONLY

## 7 series student numbers ONLY

## **2023 Semester one and Year Modules**

# Acknowledgement of Debt and Arrangement to pay for Self-Paying Students

Student Number						
I, the undersigned Name and Surname						
ID Number						
E-mail address						
Home Address						
Work Address						
Cell phone number						
<ul> <li>Declare as follows:</li> <li>1. I hereby acknowledg sum of R ("the Debt") as on th studies at Unisa and</li> <li>2.</li> <li>2.1 Are you responsible</li> <li>2.1.1 Are you currently em</li> <li>2.1.2 Name of employer/co</li> <li>2.2 Person responsible for</li> <li>2.2.1 Is he/she currently en</li> <li>2.2.2 Name of employer/co</li> </ul>	for paying yo nployed? Yompany or your accoun nployed? Your accoun	hing this acknowl atter incidental th ur study fees? Y (es No	edgement in r ereto during th 'es No	respect of my enr	olment, regi	RAND) stration or



3. Conditions to sign an Acknowledgement of Debt (hereinafter referred to as the AOD) for semester 1 and year modules for 2023

- 3.1 The AOD form must be completed and signed by the student.
- 3.2 Historic debt must be materially settled.
- 3.3 Handed over debt to the debt collector must be settled.
- 3.4 Students with historic debt will only be considered if they have passed 50% of their modules.
- 3.5 Students financially affected by Covid-19 must submit third party document confirming loss of
- income but they must have passed 50% of their modules to be considered for registration 3.6 Students applying for AOD must be temporarily registered (TP)
- 3.7 Only students that have proof of income will be considered for an AOD. (Proof income may include a payslip/parental proof of income/household proof of income/bank statement.)
- 3.8 A student that has not honoured a previous AOD and has outstanding fees must first settle the debt before an AOD for the 2023 academic year will be considered.
- 4. I hereby undertake to pay the full debt owing to Unisa in full as

follows:

#### 2023 Semester 1 (Jan to June 2023) Arrangement

Instal ment	Month	Amount
1	Jan 2023	
2	Feb 2023	
3	Mar 2023	
4	Apr 2023	
5	May 2023	
6	June 2023	

Subject to the following conditions:

4.1 All payments must be made into the following account:

Bank: FNB (First National Bank) Beneficiary: UNISA Students Deposits Account number: Select Unisa Student Deposit on the list of pre-approved Public Beneficiaries Reference: XXXXXXX 3128374764 (Your student number on the first eight spaces (If your student number is only seven digits long then put a 0 in front of the number, then leave one space open and put 3128374764)

- 4.2 Should the debt not be settled on the date as indicated above, the full outstanding balance will be handed over for debt collection and I shall be responsible for all collection fees and attorney expenses.
- 4.3 Should the debt not be settled on the date as indicated above, the full outstanding balance will immediately become due and payable, and I hereby further confirm that I am aware that my personal details could be listed at any credit bureau with the result that by credit record may be adversely affected in cases of non-payment.
- 4.4 I agree that should the debt not be settled on the due date that Unisa may refuse to release my examination results and may suspend all other services.
- 5. I hereby waive the benefits of legal exceptions, non numeratae pecuniae, non-causa debiti, errore calculi, review of statements of account and no value received, the working and effect of which I hereby admit I am fully acquainted with.
- 6. I hereby consent to the Jurisdiction of the Magistrates Court in Pretoria in respect to any legal proceedings arising from this document.
- 7. I hereby choose as my domicilium citandi et executandi for all purposes of this document and further legal proceedings, any one of the addresses mentioned above.
- 8. I agree that this acknowledgement of debt is a new course of action, and I hereby consent thereto that default judgment or an Emolument attachment order may be taken against me in the original action, notwithstanding the terms and conditions of this acknowledgement.

	Studer	it Number								
							l	INI:	SA	university of south africa
9.	I hereby cor	sent UNISA to ve	erify my income	e because I am res	sponsible for t	he study f	ee accou	unt.		
		Self-paying Student	Parent	Guardian	Spouse					
		urname	er					_		

10. I hereby indemnify Unisa against any claims that I may have against UNISA and I hereby release Unisa from all claims and demands whatsoever I now have or at any time heretofore had against Unisa.

- 11. I understand that in order for the university to consider my request, it will require certain personal information from me.
- 12. I also understand that my personal information will be provided to third parties who will assist the university with verifying my h o u s e h o l d income and that my signature to this document constitutes express written consent.

### 13. CONSENT IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT NO 4 OF 2013

I declare that all the personal information furnished by me on this form are true and correct, and I undertake to inform Unisa of any changes in my personal information. I undertake to comply with all the rules, regulations and decisions of the university and any amendments thereto and I have taken note of advice which may be applicable to students in general. I, as a student registered at Unisa or an applicant intending to study with Unisa, hereby consent that Unisa may collect, use, distribute, process my personal information for all required academic processes pertaining to my application or registration to study with Unisa, which may include but is not limited to internal administrative processing; institutional and scholarly research; and funding submissions. I also consent that Unisa may share my personal information with the Matriculation Board and Admissions Committees, Higher Education South Africa, the Department of Higher Education and Training, the Council on Higher Education, the South African Qualifications Authority, other public higher education institutions, Qualification Verification Agencies, professional bodies, Department of Home Affairs, third parties rendering various services to the university and legal entities which may lawfully require such information for legal obligations and/or investigations. I understand that in terms of the Protection of Personal Information Act (POPIA) and other laws of the country, there are instances where my express consent is not necessary to permit the processing of personal information, which may be related to investigations, litigation or when personal information is publicly available. I will not hold the university responsible for any improper or unauthorised use of personal information that is beyond its reasonable control. I confirm that I have read the notice and understand the contents. Note: The nature of personal information collected can be viewed in the Personal Information Inventory Lists published on the Unisa webpage at www.unisa.ac.za

14.	Contact numbers:							
	Father:	Cell no:						
	Mother:	Cell no:						
	Legal Guardian:	Cell no:						

Spouse:\_\_\_\_\_Cell no: \_\_\_\_\_

Signed at Print name		Signature	Date	

Email forms and supporting documents to: Uclfinance@unisa.ac.za