

Form 8 ODO

APPLICATION FOR REGISTRATION AS

VISITING STUDENT OPTOMETRY AND DISPENSING OPTICIANS

NON COMPLIANT APPLICATION WILL BE REJECTED AND SENT BACK TO YOU!

(NO ALTERATIONS TO THIS SECTION WILL BE ACCEPTED)

Note: The original application must be submitted via the local University in South Africa to:
The Registrar, PO Box 205, Pretoria 0001 or 553 Madiba Street, Arcadia, Pretoria, 0083 by registered mail or courier for ease of tracking

Α.	. To be completed by a teaching <u>institution abroad</u> where the applicant is a full-time student.		
	I, the undersigned, hereby certify that:		
	(Dr, Mr, Mrs, Miss):		
	First names :		
	He/she is in his/her year of study for the degree of		
		SEAL/STAMP OF ABROAD TEACH INSTITUTION	ING
		-	
	SIGNATURE OF DEAN OF THE FACULTY OR		DATE
	REGISTRAR OF TEACHING INSTITUTION Please submit together with your app	<u> </u>	
ъ.			
	a) Registration fee of R906.00 applicable from 1 April 2023 to 31 March 2024. Banking details as on the website. This fee must be remitted by a bank draft drawn on a bank in South Africa. (Use passport number as		
	deposit reference)		
	b) A certified copy of the applicant's passport (not older than 3 months).		
(NO ALTERATIONS TO THIS SECTION WILL BE ACCEPTED)			
C.	C. To be completed by the <u>University in South Africa</u> where student is to be temporarily registered.		
	I, the undersigned, hereby certify that:		
	(Mr/Mrs/Miss) :		
	First names :		
	will commence attendance of a course or courses in the		
	study in the faculty/school of		
	This student in enrolled for a course in (subject) in a temporary capacity for a		
	period not exceeding one academic year and not for degree purposes.		
	The student concerned will attend classes in the Department of		
	Jniversity from the (day) (month) 20 to (day) (month) 20		
SEAL/STAMP OF UNIVERSITY IN			
		SOUTH AFRICA	
	DEAN/REGISTRAR		DATE