

Department of Student Services

Residence Application Form 2024

(MALE& FEMALE STUDENTS)

Date of Birth Y Y Y D D M M Cell No.	Indicate room number if currently in the hostel:				
Faculty: Gender Married Divorced Gender Male Female	Academic Year Applied for:	Deadline for Submission: 16 October 2023			
Faculty: Course: This application is not binding on either the applicant or the Namibia University of Science and Technology (NUST). All Information will be treated as confidential. Instructions: Use block letters to complete this form where space is provided or place an 'X' in the correct square. Incomplete applications will not be accepted. SECTION 1: Personal Details Surname Initials Full Name Identity No / Passport No Initials Date of Birth Indian Other Please Specify E-mail Address Postal Address Residential Address Postal Address Residential Address Initials Full Name Initials Full	1 st 2 nd 3 rd 4 th				
This application is not binding on either the applicant or the Namibia University of Science and Technology (NUST). All Information will be treated as confidential. STUDENT NUMBER: Mode of Study Fulltime Part-time Distance Provided or place an 'X' in the correct square, Incomplete applications will not be accepted. SECTION 1: Personal Details Surname Initials Full Name Identity No / Passport No Maritial Status Single Married Divorced Gender Male Female Date of Birth Please Specify E-mail Address Postal Address Region Country SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Identity No. Residential Address Postal Address Country Country Country	Faculty				
STUDENT NUMBER: Mode of Study		This application is not binding on either the applicant or the Namibia			
SECTION 1: Personal Details Surname	Course:				
Mode of Study	STUDENT NUMBER:				
Surname	Mode of Study Fulltime Part-time Distance	provided or place an 'X' in the correct square. Incomplete applications			
Full Name	SECTION 1: Personal Details				
Full Name	Surnama	nitials			
Maritial Status Single Married Divorced Gender Male Female Date of Birth V V V D D M M Cell No. Nationality Namibian Other Please Specify E-mail Address Postal Address Region Country SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Identity No. Residential Address Postal Address Country Cell No.					
Date of Birth V V V V P Please Specify E-mail Address Residential Address Town SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Residential Address Postal Address Country Cell No.	Full Name Id	dentity No / Passport No			
Nationality Namibian Other Please Specify E-mail Address Postal Address Residential Address Town SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Identity No. Residential Address Postal Address Country Cell No.	Maritial Status Single Married Divorced Ge	ender Male Female			
E-mail Address Residential Address Town Region Country SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Identity No. Residential Address Country Cell No.	Date of Birth Y Y Y D D M M Cell No.	Tel No.			
Region Country SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Identity No. Residential Address Postal Address Country Cell No.	Nationality Namibian Other Please Specify				
Region Country SECTION 2: Contact Details of Person Responsible for Account Surname Initials Full Name Identity No. Residential Address Postal Address Country Cell No.	E-mail Address	Postal Address			
SECTION 2: Contact Details of Person Responsible for Account Surname	Residential Address	Town			
Surname Initials Full Name Identity No. Residential Address Postal Address Country Cell No.	Region	Country			
Full Name Identity No. Residential Address Postal Address Country Cell No.	SECTION 2: Contact Details of Person Responsible for Acc	count			
Residential Address Country Cell No.	Surname	nitials			
Country Cell No.	Full Name Ic	dentity No.			
	Residential Address	Postal Address			
E-mail Address Tel No.	Country	Cell No.			
	E-mail Address	Tel No.			

SECTION 3: Next of Kin Contact Details (for emergencies)					
Family relationship with the person whose particulars are supplied					
Father Mother Spouse / Partner Guardian					
Name and Surname					
Residential Address					
Tel No. Home	ountry				
Tel No. Work	ell No.				
SECTION 4: Physical Status (for planning purposes, please note that you	may be contacted]				
Do you have a disability? Yes No					
If 'YES', please specify					
Based on your disability, do you have special needs? Yes No					
If 'YES', please specify					
Do you have a chronic illness? Yes No					
SECTION 5: Medical Aid Details					
Name of Medical Aid	Medical Aid No.				
Main Member	Identity No.				
Cell No. Tel No.	E-mail Address				
Relation to Student? Father Mother Other Speci	ify				
SECTION 6: Conditions					
Senior Students	First Year Students				
Check List: Items that must be submitted together with your application. Please mark 🗸	Check List: Items that must be submitted together with your application. Please mark 🗸				
Application form: All parts of the application must be completed.	Application form: All parts of the application must be completed.				
Original June results (NO PRINT OUT FROM STUDENT KIOSK). Students doing year courses such as	A certified copy of latest school results e.g. August results.				
Engineering and Architecture should submit a progress report or a confirmation letter from a lecturer.	Certified copies of parents/guardian ID documents.				
Certified copies of parents/guardian ID documents.	Police declaration obtained in the town where parents/guardians live, stating that they do not live in				
Police declaration obtained in the town where parents/guardians live , stating that they do not live in	Windhoek. Certified copy of latest electricity/water bill OR				
Windhoek. Certified copy of latest electricity/water bill OR	Police declaration stating parents/guardians do not have a water or electricity bill. No application will be				
Police declaration stating parents/guardians do not have a water or electricity bill. No application will be	considered WITHOUT an electricity/water bill. No pre-paid print outs will be accepted.				
considered WITHOUT an electricity/water bill. No pre-paid print outs will be accepted.					

The following conditions are applicable to both senior and first year students:

- 1. NUST has limited residence space. Admission to NUST does not guarantee space in the hostel.
- 2. No hostel accommodation applications will be accepted for students residing in Windhoek.

Date

- 3. Only full-time registered NUST students will be accommodated.
- 4. A confirmation letter will be sent to all successful applicants. Unsuccessful applicants will also be notified.
- 5. NO LATE APPLICATIONS WILL BE CONSIDERED.

Year

Faculty

Signature

SECTION 7: Declaration							
I declare that the information prov	ided above is true and correct.						
Signature of Applicant		Date					
f applicant is under 21 years of age Signature of Guardian NOTE: On signing the Registration Form and/or Residence Application Form, a student binds himself/herself to obey all the legal provisions and rule of NUST, and it is the student's duty to become acquainted with such legal provisions and rules. Ignorance of such legal provisions shall no establish a defense. In this regard, NUST Act of 2015, all the Calendars and Prospectuses, the rules and prescriptions of Council, Senate, Board Studies, Departments, the Vice-Chancellor pronouncements or those of any other authorised official or body are important.							
FOR OFFICIAL USE							
To be completed by the Superinten	ident:						
Residence							
Name of Superintendent							

Student Number

Course

Floor

Room Number