

BSI SPORTS MANAGEMENT APPLICATION FOR ADMISSION

In order to complete your application, the following documents are required:

- a. **Completed Application Form,**
- b. **Certified Matric Certificate,**
- c. **Certified ID copy** (RSA residents) or **Certified Passport copy** (International students) to be submitted;
- d. A copy of a **Study Permit** (only applicable when the applicant is a foreign student, who is not in possession of SA citizenship or permanent residency).
- e. International students need to ensure they apply for a valid study permit in advance, before commencing studies at BSI. **BSI CAN NOT apply for study permits on behalf of any students.**
- f. Please note an additional once-off **International Student Levy** of ZAR9, 500 is payable by all international students,
- g. International students need to have medical / health cover to cover their whole study period in South Africa.

Application, Enrolment & Registration Procedure:

- h. An **non-refundable** application fee of ZAR750 payable on application submission,
- i. **An application received without the R750 application fee will NOT be processed. Please send payment proof of R750 to info@bsisports.com along with your application form and supporting documents,**
- j. **You can make payment for the R750 application fee via one of the following payment methods:**

Online payment on the BSI website:

- Go to www.bsisports.com
- If you don't have an account yet on the BSI website, please register for an account first:
 1. Go to **"Store"**, then **"My Account"**
 2. Registering a new account by completing your details (Username, E-mail address & Password), then click on **"Register"**
- Go to **"Store"**, then **"Merch & Services"**,

- The 1st item is “**Application Fee for Full-Time Programs R750**”, then click on “**Add To Cart**”
- You can then Checkout, fill in your card details and make payment.

EFT payment into the BSI bank account:

- Bank: Standard Bank
- Acc Name: Balderstone Sports Institute
- Acc No. 422 068 187
- Uni. Branch Code: 051-001
- Intl. Swift Code: SBZAZAJJ
- Amount: R750
- Payment Ref: Applicant’s name & surname

- k. A Placement Offer is issued to the student by BSI once it is confirmed that the application is successful,
- l. A non-refundable ZAR10, 000 initial payment is to be received by BSI to secure the student’s place,
- m. A Letter of Acceptance is issued to the student,
- n. A Program Agreement to be signed by the student and parents / legal guardians and returned with a certified copy of the student’s ID & a certified Matric certificate.

This application form & supporting documents can be e-mailed to the following address:

E-mail: info@bsisports.com

Visit BSI website for more information:

www.bsisports.com

NB: Please note information provided below is strictly confidential and will only be used for BSI enrolment & administration purposes.

FOR OFFICE USE ONLY (SPORTS MANAGEMENT PROGRAM)

Interviewed Date		Application Fee Received	
Certified Matric Certificate		Study Permit (If applicable)	
International Levy (If applicable)			
Placement Offer Issued		Issuing Date	
Initial Payment Received		Receipt Date	
Letter of Acceptance Issued		Issuing Date	
Certified ID / Passport Received		Boarding Required	

1. STUDENT PERSONAL DETAILS (Please ensure you correctly fill in all details on the space in the form)

Surname			First Name		
Preferred Name			Title: Mr. / Mrs. / Ms.		
Nationality			Province		
ID / Passport Number					
Date of Birth	DD / MM / YYYY			Gender: Male / Female	
Telephone	Home:	Cell:		E-mail:	
Please specify the year for which you are applying for:					
For example: 2024					

2. PARENTS / LEGAL GUARDIANS DETAILS (Please ensure you correctly fill in all details on the space in the form)

Father (Full Name)					
Occupation					
ID Number					
Telephone	Home:	Cell:		Work:	
E-mail:					
Mother (Full Name)					
Occupation					
ID Number					
Telephone	Home:	Cell:		Work:	
E-mail:					
Physical (Home) address					
				Postal Code	
Postal address					
				Postal Code	
Address of Parent / Legal Guardian is different from above					

Please mark with a tick	Father		Mother		Guardian	
Address						
					Postal Code	
To whom should e-mail correspondence be sent?						
Please mark with a tick	Father		Mother		Guardian	

3. GENERAL INFORMATION (Please ensure you correctly fill in all details on the space in the form)

Accommodation Required?						
Please mark with a tick	Yes		No			
If applying for accommodation, is this the applicant's first time living away from home?						
Please mark with a tick	Yes		No			
If applying for accommodation, will the applicant have his / her own transport?						
Please mark with a tick	Yes		No			
School - Name of your current / previous school:						
Telephone no. of your current / previous school:						
Please list activities you have been involved with, such as clubs, school & community organizations & sports, etc.						
How did you hear about BSI? <small>(Mark with a tick next to the relevant choice)</small>		<input type="checkbox"/> Word of Mouth	<input type="checkbox"/> Referrals	<input type="checkbox"/> Website		
		<input type="checkbox"/> Social Media	<input type="checkbox"/> Adverts	<input type="checkbox"/> Other		
Elaborate on your choice selected, e.g. Referral from whom?						

4. MEDICAL INFORMATION (Please ensure you correctly fill in all details on the space in the form)

Is the applicant currently under the care of a physician?						
Please mark with a tick	Yes		No			
If yes, please specify:						
Does the applicant have any allergies?						
Please mark with a tick	Yes		No			
If yes, please specify:						

Is the applicant on any medication program?				
Please mark with a tick	Yes		No	
If yes, please specify:				
Does the applicant smoke?				
Please mark with a tick	Yes		No	
If yes, please specify the quantity per day:				
Does the applicant drink alcohol?				
Please mark with a tick	Yes		No	
If yes, please specify the alcohol intake per week:				
Has applicant ever been expelled and / or suspended from any school and / or institution for any reasons? And / or involved with any law enforcement agency; used illegal substance (i.e marijuana, cocaine, etc.) or been treated for drug, alcohol or other substance abuse?				
If answer is yes to any of the above, please specify details:				
Are there any medical, emotional or physical needs that BSI should be aware of?				
If yes, please specify:				
Are there any learning disabilities and / or other disabilities that BSI should be aware of?				
If yes, please specify:				

By signing below, I certify that the information provided on all pages of this application is accurate and true to the best of my knowledge. Additionally, I hereby agree to the terms of the Student Admission Privacy Policy attached hereto and made available on the BSI website at www.bsisports.com. BSI reserves the right to review a student's eligibility to attend the relevant program should any of the above information be false.

Signed at _____ (Place) on this _____ (Day) of _____ (Month) 20____

Student (Full Name)	Signature
Parent / Guardian (Full Name)	Signature