THE NATIONAL UNIVERSITY OF LESOTHO

## P.O. Roma 180,

**Lesotho.**

**Africa.**

**Telephone: +266 22340601**

## Fax: +266 22340000

**Website: http://www.nul.ls**

ACADEMIC OFFICE

Student Number: ………………………………..

Surname: ……….………………………………..

Receipt No.………………………………..

|  |
| --- |
| **ACCEPTANCE FORM** |

To**: The Admissions Secretary**

**National University of Lesotho**

**P.O. Roma 180**

**Lesotho**

Tel: **22340601/52213809/36**

Fax: **22340000**

Website: **http//www.nul.ls**

1. I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (full name), accept the offer of Admission to study at the National University of Lesotho. I undertake to comply with the procedures and regulations spelled out in the Students’ Handbook in particular, I agree as per the letter from the University dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. I undertake to comply with the procedures and regulations as spelled out in Students’ Handbook. In particular, I agree that:

1. actions which are of violent and disruptive nature and use of obscene language are dismissible offences which the University will take against me should I engage in them;
2. disputes of any nature with my sponsors are not the responsibility of the University and should not be a reason for any demonstrations or strike in any of the University’s campuses. Should I engage in any disruptive behaviour on the above, the University should have the right to exclude me from campus and/or expel me.
3. any damage to University property that I may cause as a result of any demonstration will be charged to my account as an individual regardless of whether the demonstration was sanctioned.
4. I will share a study bedroom

3. I enclose:

1. Medical Certificate
2. Receipt for Acceptance fee (M600)
3. Receipt for ID Card (M50)
4. Receipt for caution fee (M400)

4. I understand that; in accepting this offer of admission, I shall be under the disciplinary authority of the University, and will therefore abide by the Arrangements and Regulations for Student Government as made from time to time by the University Council.

5. I understand that; immediately upon registration, I or my parent/guardian assume primary responsibility for the payment of all fees for the whole academic year, and that if I subsequently withdraw, or leave the University for whatever reason, any refund in this regard will be at the sole discretion of the University.

6. I understand that it is not the responsibility of the University if any promised scholarship is not forthcoming or, if for any reason ceases.

7. I understand and accept that; upon registration for any subsequent academic year, the University may, at its own expense, require me to undergo further medical examination.

8. I understand that until financial clearance has been obtained from the Bursar, academic registration will not be permitted.

9. I understand that a person becomes a student only after financial clearance and academic registration fees for any one academic year have been paid before the first day of the first semester.

10. I understand that students who fail to meet the above requirements will not be registered.

11. If I have been admitted as a self-sponsoring applicant, special arrangement may be made before hand with the office of the Registrar to pay fees in three instalments as follows 40% at the beginning of registration period, 30% by end of January 2019; and 30% by end of April 2019.

NUL banking details are: **Standard Lesotho Bank, Account No: 9080001407356,**

**Code: 062067, Swift Code: SBICLSMX.**

**Signature (of student): ……………………………………………**

**E-mail address: …………………………………………………….**

**Cell Number: ………………………………………………………..**

**Date: ………………………………………………………………….**

**Next Of Kin Information**

**Full Names: ……………………………………..............................**

**Relationship: ………………………………………………………...**

**Cell No.: ……………………………… Work Telephone: ……….…………………….**

**To:**

**The Admissions Secretary**

**National University of Lesotho**

**P.O. Roma 180**

**LESOTHO**

**SOUTHERN AFRICA**