

STUDENT NUMBER

Semester 1

Semester 2

**PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THIS FORM (IN BLOCK LETTERS USING A BLACK PEN).**

1. This Articulation Application Form must only be completed by students wishing to articulate from a phase-out (pre 2011) programme to a new programme (as from 2011).
2. This Articulation Application Form may not be faxed or e-mailed to the IMM Graduate School.
3. Read the IMM Graduate School Student Yearbook as well as the Prospectus before completing and submitting this Articulation Application Form together with all relevant information.
4. The IMM Graduate School cannot accept/process incomplete Articulation Application Forms if any programme fees are outstanding. The onus rests upon the student to provide all outstanding information/documentation in order for the IMM Graduate School to progress the Articulation Application Form.
5. Late registration fees will apply when the Articulation Application Form and/or Registration Form is received after the due date, even if the payment was received by the due date.
6. **A CERTIFIED COPY OF YOUR NSC/SC/FOREIGN QUALIFICATION IS REQUIRED.**

## SECTION A: PERSONAL DETAILS

**TITLE** ☐ Prof ☐ Dr ☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Other \_\_\_\_\_ **GENDER** ☐ Male ☐ Female

**SURNAME** As per ID Document \_\_\_\_\_ **PREFERRED NAME** \_\_\_\_\_

**FIRST NAME(S)** As per ID Document \_\_\_\_\_

## SECTION B: ACADEMIC PROGRAMME DETAILS

**Please tick the Phase-out programme (programmes prior to 2011) for which you have been registered previously. (Academic Record attached)**

- |   |   |
|---|---|
| <input type="checkbox"/> Certificate in Retail Marketing                        | <input type="checkbox"/> Diploma in Marketing               |
| <input type="checkbox"/> Certificate in Sales Management                        | <input type="checkbox"/> Post Graduate Diploma in Marketing |
| <input type="checkbox"/> Bachelor of Business Administration (Marketing) (BBAM) |   |

**Please tick the programme for which articulation is being applied:**

- |   |  |
|---|--|
| <input type="checkbox"/> Pre-Varsity Programme                        | <input type="checkbox"/> Bachelor of Business Administration in Marketing Management (BBAMM) |
| <input type="checkbox"/> Higher Certificate in Marketing              | <input type="checkbox"/> Higher Certificate in Export Management                             |
| <input type="checkbox"/> Diploma in Marketing Management              | <input type="checkbox"/> Diploma in Export Management  |
| <input type="checkbox"/> Postgraduate Diploma in Marketing Management | <input type="checkbox"/> BCom in Marketing and Management Science                            |

## STUDENT DECLARATION

- I understand and accept that this Articulation Application Form must first be approved by the Dean of Faculty before I may commence the articulation.
- I understand and accept the consequences of articulating from a phase-out programme to a new programme, such as the difference in NQF levels of the phase-out programmes v.s. the new programmes, the difference in number of modules and that only 50% of modules may be credited from one new programme to another.
- I understand and accept that exemptions will only be granted for similar modules written and passed in the last 5 years.

**STUDENT SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_ / \_\_\_\_\_ / 20 \_\_\_\_\_

## FOR OFFICE USE ONLY

<b>Consultant name:</b>	<b>Date application was received</b>	<b>Date application was updated</b>	<b>Authorised by</b>

**National Office:** Johannesburg Atlas Studio, 33 Frost Avenue, Braamfontein Werf, P O Box 91820, Auckland Park, 2006, Tel +27 (0)11 628 2000, Fax to email 086 212 3272, Email info@immgsm.ac.za  
**Cape Town Administration Office:** Level 3, Stadium on Main, Main Road, Claremont, Cape Town, 7708, P O Box 23998, Claremont, 7735, Tel +27 (0)21 671 4426, Fax to email 086 212 3201, Email info.ct@immgsm.ac.za  
**Durban Administration Office:** 245 Peter Mokaba Road, cnr Valley View Road, Morningside, Durban, P O Box 35263, Northway, 4065, Tel +27 (0)31 312 2239, Fax +27 (0)31 312 6748, Email info.dbn@immgsm.ac.za  
**Ghana Administration Office:** Chartered Institute of Marketing Ghana, 4th Floor I NCR Building, Opposite Roxy Cinema on The Kwame Nkrumah Avenue, PO Box GP 18235 I Accra-Ghana, Tel +27 11 628 2000, Email info@ghana@immgsm.ac.za  
**Nigeria Administration Office:** National Institute of Marketing Nigeria, Centre for Management Development, Cmd Road I Ikosi Ketu I Shangisha Lagos, Tel +27 11 628 2000, Email info@nigeria@immgsm.ac.za  
**Zambia Administration Office:** Zambia Institute of Marketing, 1st Floor I National Housing Authority, Annex Building I Chilufya Mulenga Road, Longacres I Zambia, PO Box 32180 I Lusaka, Tel +27 (0) 11 628 2000, Email info@zambia@immgsm.ac.za  
**Zimbabwe Administration Office:** Suite N & P, Sam Levy's Village, Borrowdale, Harare, P O Box MP 394, Mount Pleasant, Harare, Tel +263 (4) 853177 or +263 773 475003 Email imm.zim@immgsm.ac.za