



Graduate School

Marketing • Supply Chain • Business

# EXTRA TIME / SCRIBE APPLICATION FORM 20

STUDENT NUMBER

☐

Semester 1

☐

Semester 2

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

1. This form is to be completed by all students requiring extra time or scribes in an examination.
2. Read the current IMM Graduate School Prospectus and IMM Graduate School Yearbook carefully before completing and submitting the form with all the relevant information.
3. Return the completed form to the IMM Graduate School office closest to you.
4. The closing date for applications for first semester is 1 April and the closing date for second semester is 1 September. No late applications will be accepted.
5. Please note that a scribe administration fee is payable.
6. Student granted extra time for morning exams will start at 09h00 and will stay after the exams are closed.  
Students granted extra time for afternoon exams will start earlier and finish at 17h00.
7. Students using a scribe will be given an additional 30 minutes to read through their script. They will start 30 minutes earlier for afternoon exams.

## SECTION A: STUDENT 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 \_\_\_\_\_

TELEPHONE NO. ( \_\_\_\_\_ ) \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EXAMINATION VENUE: \_\_\_\_\_

\_\_\_\_\_ CITY \_\_\_\_\_ COUNTRY \_\_\_\_\_

## SECTION B: MEDICAL DETAILS FOR EXTRA TIME / SCRIBE

I would like to make use of a scribe for the examination session for the semester listed above: Yes ☐ No ☐

I would like to make use of additional time for the examination session for the semester listed above: Yes ☐ No ☐

(A maximum of 15 minutes per hour may be granted)

Please provide a brief description of the reason for extra time/scribe:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A certified copy of my medical certificate from a registered practitioner or educational psychologist has been included with my application form: Yes ☐ No ☐

### Note:

1. If applying for extra time or a scribe, the medical certificate must have been dated within the last 2 years.
2. If applying for extra time or a scribe for emergency purposes eg. a broken arm, the certificate must have been dated within the last two months.

I understand that if using a scribe, there will be an administration fee per examination per semester (Available in the IMM Graduate School Prospectus): Yes ☐ No ☐

## SECTION C: STUDENT DECLARATION

I have read the IMM Graduate School Prospectus and the IMM Graduate School Yearbook.

I understand and accept the IMM Graduate School's Examination policy and agree to abide by the rules laid down therein.

I understand and accept that upon my acceptance to the IMM Graduate School, I immediately become liable to the IMM Graduate School for the full course fees.

I undertake to pay the full course fees on or before the due dates.

I understand and accept that, should I withdraw from the programme at any time, I will give written notice of my intention and immediately pay all monies owing.

I understand and accept that for each semester a separate Extra time/Scribe Application Form must be completed.

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

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

The IMM Graduate School of Marketing is registered with the Department of Higher Education and Training (DHET) as a private higher education institution under the Higher Education Act, 1997. Registration certificate number 2000/HE07/013.