

REPLACEMENT/ DIGITAL CERTIFICATE APPLICATION FORM 20



Graduate School

STUDENT NUMBER

APPLYING FOR
(For office use only)

First Print Correction

Replacement

Digital

SECTION A: PERSONAL DETAILS

SURNAME _____ FIRST NAME _____

EMAIL (Compulsory) _____ CONTACT NUMBER _____

ID NO/PASSPORT NUMBER

SECTION B: APPLYING FOR

PLEASE TICK THE OPTION/S YOU ARE APPLYING FOR.

- Digital Certificate (Online Certificate)*
- Name Correction (Spelling correction or 2nd name omitted. Incorrect certificate must be returned. Does NOT include name changes.)*
- Replacement Certificate (Lost or stolen certificate.)**

* E-mail only page 1 of the application form to exams@immqsm.ac.za. Include a copy of your ID and proof of payment.

**Submit or courier both pages 1 and 2 to your nearest IMM GS office. Addresses available on our website. Include an originally certified copy of your ID and proof of payment. Ensure that the affidavit is signed and stamped by a commissioner of oaths.

If applying for both a digital and a replacement certificate, the fee for each is applicable per certificate. Refer to the fee structure on our website - <https://imm.ac.za/>

SECTION C: QUALIFICATION NAME

	CERTIFICATES TO REPLACE:	YEAR:
1.		
2.		
3.		
4.		

SECTION D: COLLECTION

TO BE COLLECTED BY	ALTERNATIVE COLLECTION
<p>INITIALS AND SURNAME ID _____</p> <p>NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>RECIPIENT CONTACT DETAILS _____</p> <p>COMMENTS _____</p> <p>OFFICE TO COLLECT FROM _____</p>	<p>If certificate is collected by a 3rd party, they must have upon collection</p> <p>(1.) a printed copy of the graduates ID ,</p> <p>(2.) a printed and signed letter of permission from graduate and</p> <p>(3.) a printed copy of their own ID.</p> <p>Alternatively, graduate may arrange a courier service to collect at own cost.</p> <p>Collections may be done from 08:00 to 16:00 on Mondays to Thursdays, and from 08:00 to 15:00 on Fridays.</p>

STUDENT DECLARATION

I hereby confirm that I have read and agree to the IMM Graduate School policies and procedures, including the following:

- All needed fees have been paid.
- All needed documents have been certified and submitted.
- Corrections/Replacements could take 4 – 6 weeks.
- Replacement Certificates - Student name and surname details will be printed as per the details at the time that the qualification was conferred. Names and surnames will not be changed to current ID details.
- Replacement certificates will state the word "REPLACEMENT".
- Processing will only commence once all needed documents and payment have been received.
- All our office addresses are available on our website

STUDENT SIGNATURE _____ DATE _____ / _____ / 20 _____

FOR OFFICE USE ONLY

Consultant name:	Amount paid:	Certificate Number:	Date printed:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Approved/ Declined:	Approved/ Declined (Reason):	Forwarding:	Printed by:
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

