

Application: Holiday Accommodation

	S	ection A: Student Detail	ils	
Student no.				
Full Names				
Surname				
Cell Phone no.				
Email Address				
Residence				
Field of Study				
		Section B:		
Accommodation Period	From:		То:	
Reason for Application				
Signed at	OI	n this day of	20YY	
Signature of Student		Name of Student		
Please tick		Supporting Documents ocumentation attached to		
Examination timetable		Motivation letter by lecturer/convener		

Applications to be completed and submitted via email to (for BFN Campus)

ResApplications@ufs.ac.za / (for South Campus) SCResApplications@ufs.ac.za

HRA DATE STAMP AS
ACKNOWLEDGMENT OF
RECEIPT
NB: date of stamp will be
considered as the
application date