

# 2024-2025 Wits Readmissions - Application Form

Please ensure that your application is clear and coherent; and comprehensive to ensure that the WRC Committee has a full understanding of your motivation for readmission. It is your responsibility to ensure that all relevant documentation is provided to WRC Committee.

<b>Full Names:</b>	
<b>Surname:</b>	<b>Student ID:</b>
<b>Date of Birth:</b>	<b>Term:</b>
<b>Programme:</b>	

## Student Representation

Please tick the appropriate box

Do you wish the student member of WRC to leave the meeting when your case is considered?

Yes  No

## Contributing Factors

Briefly list and detail the factors that contributed to your failure (e.g. ill-health, financial difficulties, accommodation problems, family problems etc).

If reasons were due to ill-health, please get the medical practitioner who attended to your illness to complete the University Health Form and attach this document together with any supporting information with your application.

Please attach any other relevant documented evidence with your application e.g. extra time application, police report etc.

Explain why the problems indicated above will not affect your later years of study if you are permitted to renew your registration. If you are readmitted, how do you plan to overcome your difficulties? If possible, please provide evidence of your intentions.

## Personal Redress

Please tick the appropriate box

Have you done the following:

Consulted with Campus Health and Wellness Centre?	<b>Yes</b>	<b>No</b>
If YES, do you want them to give a confidential report to the WRC?	<b>Yes</b>	<b>No</b>
Consulted with Counselling and Careers Development Unit?	<b>Yes</b>	<b>No</b>
If YES, do you want them to give a confidential report to the WRC?	<b>Yes</b>	<b>No</b>
Consulted with other medical providers, .i.e. doctors, hospitals?	<b>Yes</b>	<b>No</b>
Consulted with Faculty advisors?	<b>Yes</b>	<b>No</b>
Consulted with course co-ordinators or lecturers?	<b>Yes</b>	<b>No</b>
Submitted any information during the past academic year to the Faculty Office or to Schools that may support your representation?	<b>Yes</b>	<b>No</b>
Attended academic development tutorials or received academic support offered through consultation with your tutor or lecturer?	<b>Yes</b>	<b>No</b>

If you have indicated above that you wish the CHWC and/or CCDU to provide confidential reports, you will need to go to CHWC and/or CCDU to request them to send the reports to your Faculty Office by the closing date for submission of this form.

## Declaration

I declare that information given on this form is true and correct.

The submission of false information will be viewed in a serious light.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**