



Student Financial Services – Student Fees Office

THIS DOCUMENT MUST BE COMPLETED BY THE STUDENT AND THE BANK
STUDENT BANK DETAILS

SECTION 1: STUDENT TO COMPLETE

Student Number : _____
Surname : _____
First Name/s : _____
Contact Details : _____
Signature of Student : _____ Date: _____

SECTION 2: BANK TO COMPLETE (for ACB Transactions)

(Ensure that this account is ACTIVE - To avoid ACB Rejections)

Name of the Bank : _____
Street Name : _____
Branch Code : _____
Account Number : _____
Type of Account : Savings Current

**BANK
STAMP**

Signature of Bank Officer: _____ Date _____

**A PENALTY FEE IS LEVIED IF PAYMENTS ARE REJECTED BY THE BANK
(Refer to current Fees Guide)**

ATTACH: YOUR LATEST BANK STATEMENT, STUDENT CARD & I/D COPY

RETURN COMPLETED FORM TO THE FEES OFFICE ON YOUR CAMPUS OR VIA EMAIL AT:

WESTVILLE STUDENTS: Westvillefees@ukzn.ac.za
PIETERMARITZBURG STUDENTS: Pmbfees@ukzn.ac.za
EDGEWOOD STUDENTS: Edgewoodfees@ukzn.ac.za

HOWARD COLLEGE STUDENTS: Howardfees@ukzn.ac.za
MEDICAL SCHOOL STUDENTS: Medschfees@ukzn.ac.za