

To: The Chief Financial Officer

DEBIT ORDER INSTRUCTION  
Mangosuthu University Technology  
PO Box 12363  
Jacobs  
40256

FOR ACTION ON THE \_\_\_\_\_ OF EVERY MONTH.

Dear Sir,

UNIVERSITY FEES FOR:

Student Name and Surname: \_\_\_\_\_

Student Identity Number: \_\_\_\_\_ Student Registration No.: \_\_\_\_\_

I hereby request, instruct and authorise you to draw against my account with the below mentioned bank, the sum of R \_\_\_\_\_ ( \_\_\_\_\_ Rand) being the amount

necessary for the monthly payment of university fees in respect of the above student on the date as stipulated above, or the preceding day if it falls on a week-end, commencing on

\_\_\_\_\_ 2023 and continuing until \_\_\_\_\_ 2023, or until your full account is up to date.

All such withdrawals from my bank account by you shall be treated as though I have signed them personally. Receipt of this instruction by you shall be regarded as receipt thereof by the bank.

SIGNATURE OF PARENT/GUARDIAN \_\_\_\_\_ Date: \_\_\_\_\_

**The details of my bank account are as follows:**

Name of Bank account holder		
Name of bank		
Brand)	Name:	Branch Code:
Account number		
Type of account	Cheque / Savings / Transmission	
Signature of bank account holder as signed on cheques / documents	Date: _____	
Relationship of account holder to student:		

Attach letter from bank confirming account details or the first page of bank statement **(not more than one month old)** to confirm bank account details of the bank account above.