

# VISITORS FORM

Title:  Mr  Mrs  Prof  Dr / .....

Name: .....


Surname: .....

University: .....

Position: .....

Please attach your CV  
Acrobat Pro users



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attach their CV separately to the email,  
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FREE version of Acrobat.

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# SECTION A: ACCOMPANYING UNIVERSITY DELEGATES

1) Title:  Mr  Mrs  Prof  Dr / .....

Name: .....

Surname: .....

University: .....

Position: .....



**CV Attached via:** *(please check)*

- Attachments Pane**  
Acrobat Pro users only
- As Attachment in Email**  
Acrobat Reader users only

2) Title:  Mr  Mrs  Prof  Dr / .....

Name: .....

Surname: .....

University: .....

Position: .....



**CV Attached via:** *(please check)*

- Attachments Pane**  
Acrobat Pro users only
- As Attachment in Email**  
Acrobat Reader users only

3) Title:  Mr  Mrs  Prof  Dr / .....

Name: .....

Surname: .....

University: .....

Position: .....



**CV Attached via:** *(please check)*

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Acrobat Reader users only

4) Title:  Mr  Mrs  Prof  Dr / .....

Name: .....

Surname: .....

University: .....

Position: .....



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## SECTION B: ARRIVAL FLIGHT DETAILS

Date:  Time:  Flight Number:

## SECTION C: DEPARTURE FLIGHT DETAILS

*Departure from Gqeberha (Former PE)*

Date:  Time:  Flight Number:

## SECTION D: AIRPORT TRANSFERS & ACCOMMODATION

Airport Transfer needed?  Yes  No

Accommodation booking assistance needed?  Yes  No

Accommodation booking made at:

Please provide any details regarding special requirements:

## SECTION E: FACULTY MEETINGS

Please state the purpose of your visit and the specific faculty you would like to meet with:

Please state your areas of interest:

Please specify the dates you would like to spend on campus:

## SECTION F: ADDITIONAL EVENTS

Sightseeing / Excursion booking assistance?  Yes  No

Please specify your interest:

*Thank you for taking the time to complete this form,*

*Once you have completed your attendee form please SAVE it and email the PDF to:  
Anele.Mngadi@mandela.ac.za*