



City Changers Institute Contract 2024:

Doxa Deo and affiliated entities employees

Program Fees:

Full Amount:

CCEP (City Changers Equipping Program) R2950.00 fee per year.

CCIS (City Changers Institute Student) R3250.00 fee per year

CCIS Worship R3750.00 fee per year

50% subsidy applied:

CCEP (City Changers Equipping Program) R1475.00 fee per year.

CCIS (City Changers Institute Student) R1625 fee per year

CCIS Worship R1875.00 fee per year

Payment Options (Mark applicable choice):

CCEP:

- Settlement of **Full Amount** of R1475 on or before 1 March 2023.
- 8 Instalments of R184.38 to be deducted from salary starting in March.

CCIS:

- Settlement of **Full Amount** of R1625.00 on or before 1 March 2023.
- 8 Instalments of R203.15 to be deducted from salary starting in March.

CCIS Worship:

- Settlement of **Full Amount** of R1725.00 on or before 1 March 2023.
- 8 Instalments of R215.63 to be deducted from salary starting in March.

BANKING DETAILS:

City Changers Institute NPC

Bank: ABSA

Account number: 4085 2657 10

Account type: Cheque

Branch code: 632005

Ref: Student No. + Surname (for deposit, Initial + Surname + Program + Campus, e.g. M Burger CCEP BL)

Withdrawal Policy:

1. An exit interview with your Campus and CCEP Learning Centre Leader is required.
2. R950.00 of the fee is a non-refundable deposit.
3. Withdrawal within 1st term: credit for 60% of annual fees less deposit
4. Withdrawal within 2nd term: credit for 40% of annual fees less deposit
5. Withdrawal within 3rd term: credit for 15% of annual fees less deposit
6. If the student wants to repeat the year, the full amount due must be settled in the current year. A fee of R950.00 will be payable for registration cost and a new manual and journal in the year that the student is repeating.

Banking details: City Changers Institute NPC
Bank: ABSA; Account number: 4085265710
Account type: Cheque; Branch code: 632005
Ref: Student Number as per statement

Initial:

Student Declaration:

1. I acknowledge that by registering for the CCI Student programme, I am required to enrol into the CCEP and SATS programs.
2. I acknowledge responsibility for the payment of all my City Changers Institute related studies and declare that all information supplied on registration is correct and accurate.
3. I acknowledge that I remain responsible for the full fees until the subsidy application has been received and processed.
4. I declare that I fully understand the conditions of studies and course fees involved (as set out above).
5. I acknowledge and understand that my personal information will be required for the purposes of payment and invoicing purposes.
6. I agree and give my consent to the City Changers Institute to process my personal information for the purposes relating to the collection of my fees and further agree that the City Changers Institute may share this information for this purpose with companies within its *group, *financial institutions, registered credit providers as well as its service providers.
7. I commit to always conduct myself ethically and will notify my programme leaders as soon as any related challenges should arise (failure to do so will lead to disciplinary steps been taken)
8. I give consent to participating in all City Changers Institute related activities and that neither the City Changers Institute, or any of its staff, or relating individuals can be held accountable for any injury, loss or damage relating to myself or my property.

Person Responsible for Account if not Student (parent / legal guardian / sponsor):

1. I declare that I fully understand the conditions of studies and course fees involved (as set out above).
2. I acknowledge and understand that my personal information will be required for the purposes of payment and invoicing purposes.
3. I agree and give my consent to the City Changers Institute to process my personal information for the purposes relating to the collection of my fees and further agree that the City Changers Institute may share this information for this purpose with companies within its *group, *financial institutions, registered credit providers as well as its service providers.

Student Name

Student Signature

Date:

Parent / Legal Guardian / Sponsor Name

Parent / Legal Guardian / Sponsor Signature

Date:



CCI Subsidy Application Form 2024

Name of Employee: _____

Campus/Entity: _____

Name of Student (Employee/Spouse/Child):

Student Number: _____

Program:

CCEP (City Changers Equipping Program) R2950.00 fee per annum, 50% subsidy R1475.00

CCIS (City Changers Institute Student) R3250.00 fee per annum, 50% subsidy R1625.00

CCIS Creatives R3750.00 fee per annum, 50% subsidy R1875.00

1. I acknowledge that subsidies are taxable and that I will be taxed on the subsidy I receive at the same rate as my current income tax deduction.
2. I acknowledge that I will remain responsible for full amount of the CCI program if I am no longer employed by Doxa Deo or it's affiliated entities.

Employee Name:

Date: _____

Employee Signature:

SMU Leader Name:

Date: _____

SMU Leader Signature:

Please forward completed application to finance@cci.ac.za for processing

For Official use: Captured on VIP	
SIGNATURE:	DATE:

REQUEST FOR SALARY DEDUCTION

Name of Employee: _____

Campus/Entity: _____

Detail:

CCI Program (Mark Applicable Choice):	Amount:
CCEP (City Changers Equipping Program)	R1475.00
CCIS (City Changers Institute Student)	R1625.00
CCIS Creatives	R1875.00
Total Amount to deduct:	

I hereby authorise and request that the abovementioned amount be deducted from my salary by the Doxa Deo family payroll office in **8** (eight) equal instalments starting from the first salary after the date of this letter.

Employee Name:

Date: _____

Employee Signature:

Please forward completed request to finance@cci.ac.za for processing

For Official use: Captured on VIP	
SIGNATURE:	DATE: