Chartered Governance Institute of Southern Africa

Address: Block C, Riviera Park, 6 – 10 Riviera Road, Killarney, 2193. PO Box 3146, Houghton, 2041
Telephone: +27 11 551-4000 **Website:** www.chartgov.co.za
Australia | Canada | China | Malaysia | New Zealand | Singapore | Southern Africa | United Kingdom | Zimbabwe

BOARD POSTPONMENT FORM OCTOBER 2026 TO MAY 2027

Please also note that, in accordance with the postponement process, the completed postponement form and the applicable payment must be submitted together. A postponement cannot be approved or processed if the required form and payment are not received together.

It is the student's responsibility to ensure that the completed postponement form and proof of payment are submitted to the Student Department within the applicable timeframe. Simply making payment, without submitting the required postponement form, does not constitute an approved postponement.

Furthermore, a student cannot postpone an examination if there are any outstanding examination fees on their account. All examination fees must be settled in full by the relevant registration closing date, namely:

- **31 March for the May examination session; and**
- **31 August for the October examination session.**

These requirements form part of the examination registration and postponement processes, and students are expected to familiarise themselves with and adhere to the applicable procedures and key dates.

IMPORTANT NOTICE:

Postponement can only take place if you have paid your enrolment fees in full. Please note that we no longer have a de-registration option, and you would need to cancel your examination before closing dates or postpone your examination before closing dates.

➢ **Postponements due to work commitments, illness or bereavement of extended family members will not be considered under any circumstances.**

Other information

- Ensure that you signed this postponement form and completed in full.
- Ensure your medical certificate states that they are aware you are writing examinations.

- Cancellations may be requested before the closing date for enrolment (**31 March for May examinations and 31 August for October examinations**) at a fee thereafter postponement fees are applicable. You can **only** postpone a subject if you have paid your fees in full.
- Postponements may be requested after the enrolment closing date. Please check our key dates for opening and closing dates.
- If we do not receive both your postponement form **and** your proof of payment before the postponement closing date you will not be postponed.
- Postponements after that date will not be permitted and the examination fees will be forfeited. Your examination will be reloaded automatically, and fees will be payable.
- Candidates are allowed only one postponement per module, which is valid for 6 months. Thereafter they must reregister for the subject.
- A request for a postponement is only applicable for the following examination sitting and will not be allowed after the closing date.
- Payment for the postponement is compulsory after closing date for enrolment, regardless of the reason (i.e. bereavement and illness). *All doctor's certificates must stipulate that the medical practitioner is aware that examinations are taking place.* Postponements for bereavement and illness may only be requested from **Please check our key dates for opening and closing dates.**

- **POSTPONEMENT FEES ARE NOT REFUNDABLE**

POLICY: POSTPONEMENTS ARE VALID FOR 6 MONTHS ONLY - YOU ARE NOT ALLOWED TO DOUBLE POSTPONE ANY SUBJECT (YOU CAN NOT POSTPONE A SUBJECT TWICE).

Mail to CGISA at PO Box 3146, Houghton, 2041

PLEASE PRINT IN BLACK INK

Application details

PERSONAL INFORMATION			
Student No.:			
Title:		Surname:	
Forenames			
Maiden Surname:		Date of Birth:	
ID No./Passport No.:		Disability:	
Equity: (Required by SAQA)		Hearing	
Black-African		Physical	
Black-Coloured		Sight	
Black-Indian		Communication	
White		Intellectual	
Nationality:		Emotional	
Home Language:		Other	
Gender		Proof of disability (e.g. medical certificate, psychologist's report) must be provided	

EMPLOYMENT INFORMATION				
Name of employer			**Vat No.:**	
Your position				
Employer email				
Industry: Please tick only one of the Industries listed	Company Secretarial/ governance/ compliance	Risk Management / internal control	Accounting audit/ finance	Taxation
	Legal	Management administration	Education/ training	Other: Please describe

ADDRESS			
Physical		Postal	
Address:		Address:	
Suburb:		Suburb:	
City:		City:	
Postal Code:		Postal Code:	
Province:		Province:	
Country:		Country:	

CONTACT INFORMATION			
Home Telephone No.:		Work Telephone No.:	
Cell Phone No.:		Alternative Telephone No.:	
Email Address:		Alternative Email Address:	
		Fax No.:	

EDUCATIONAL INFORMATION			
Grade:		Year Completed:	

Highest School Town/ City:		Highest School Province:	
Postal Code where completed (required by SAQA)			
Tertiary Qualifications			

SKILLS DEVELOPMENT PROVIDER INFORMATION Please note that you must only use the services of an accredited provider (see website for information)	
Name of provider:	

Indicate with an X the module chosen TO POSTPONE

Board Modules		
AG-04	**Applied Governance (NQF8)**	MAY 2027
CL-04	**Corporate Law (NQF8)**	MAY 2027
CSP-04	**Company Secretarial Practice (NQF8)**	MAY 2027
DS-04	**Development of Strategy (NQF8)**	MAY 2027
ERM-04	**Enterprise Risk Management (NQF8)**	MAY 2027
FDM-04	**Finance for Decision Making (NQF8)**	MAY 2027
PSC-04	**Public Sector Governance (NQF8)**	MAY 2027
RC-04	**Risk and Compliance (NQF8)**	MAY 2027

Payment

Please refer to the applicable fee schedule.

Payment Options

- Electronic Funds Transfer (EFT)
- Direct deposit into the CGISA's bank account
- Card Payment at CGISA's office with physical card
- Online payments via the CGISA's online portal – you have to log in as a student to process payment

Deposit/Cheque Payment

Account holder: Chartered Governance Institute Southern Africa
Bank details: Nedbank
Branch name: Braamfontein
Branch code: 19 87 65
Account number: 1968 298 991

Reference:
Name, Surname and Student Number
[COMPULSORY]

Please ensure that you use your student number, name and surname when making a payment. This is essential for our accounts department to allocate your payment to the correct account

If no or part payment has been received the postponements will be cancelled and you will AUTOMATICALLY BE RE-REGISTERED and be liable for outstanding fees.

Please e-mail postponement form and proof of payment to students@chartgov.co.za

Declaration

I have read the Institute's Student Handbook and agree to comply with the rules contained therein. I acknowledge that any non-compliance will result in forfeiture of rights that would normally be due to me. I furthermore acknowledge that the Institute is not a tuition provider and therefore I cannot hold the Institute liable for the content or presentation of tuition material.

The Institute reserves the right to change terms and conditions at any time, and you agree to abide by the most recent version.

I specifically note the terms and conditions contained in the Student Handbook and related Institute material in hard and soft copy, pertaining to:

1. Registration as a private candidate
2. References throughout the Student Handbook to the Institute's role and responsibilities, especially with regard to limitations of support, NQF status, provisions of syllabus and curriculum outlines, the role of prescribed and recommended texts and textbooks as well as study guides, and my responsibility as a student.
3. The final decision and authority of the Chief Examiner
4. The use of the correct and appropriate channels for communication and appeals.
5. The Institute and its subsidiaries make no claims whatsoever regarding the guarantee of jobs or emigration/immigrations points or benefits.
6. That all services and examination/course results are ONLY obtainable on full payment of all fees due - in advance, with no refunds payable.
7. That the onus is on me to provide clear and unambiguous proof of such payments.
8. All other information contained in the Student Handbook and related hard and electronic copies of pertinent materials relating to my responsibilities and duties as a student.

_____ _____

SIGNATURE DATE

PERMISSION TO USE PROCESS PERSONAL INFORMATION

By ticking the box below:

- You consent to CGISA processing your personal information (including the information provided by you to CGISA in this form), in order for CGISA to fulfil its obligations to you pursuant to this form and agree that CGISA may send relevant communications to you for any purposes referred to in this document and/or in connection with CGISA's activities.
- You acknowledge that processing your personal information is in your legitimate interests and is necessary in order for CGISA to carry out its functions as requested by you in terms of this form.

You agree to the terms of CGISA's privacy policy (available at which sets out, *inter alia*, further information as to the personal information which CGISA processes, the purpose for such processing and your rights as a data subject.

https://www.chartgov.co.za/wp-content/uploads/2024/12/CGISA-Privacy-Policy-April-2022.pdf

- If you do not tick the box below, CGISA will be unable to fulfil its functions in terms of this form.

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Should any of your details change, please notify us of same so that our records are as accurate as possible.