



# ED-U-COLLEGE WITBANK

## REFERENCE FORM FOR SELF-EMPLOYED ACCOUNT HOLDERS

---

*This referral form must be completed by three (3) parties that can confirm the primary guardian's financial good-standing.*

### Personal Information

---

Full Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Business Information

---

Business Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Business Reg. No.: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## References

---

Please provide the names and contact information of at least three references who can confirm your financial good standing. References may include accountants, financial advisors, or other professionals who are familiar with your business finances.

1. Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

3. Name: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## Authorization

---

By submitting this form, I authorize the above-named references to provide information about me and my business with them to Ed-U-College Witbank for the purpose of verifying my financial good standing. I understand that this information may be used in connection with my account application.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_