

Application for Admission to Postgraduate Study

ONLY FOR USE BY CURRENTLY REGISTERED STUDENTS OF THE UNIVERSITY OF KWAZULU-NATAL WHO WISH TO APPLY FOR A POSTGRADUATE QUALIFICATION (EXCLUDING MASTERS OR DOCTORAL PROGRAMMES).

CLOSING DATES : 30 OCTOBER 2020 OF CURRENT YEAR

NOTE

1. IN EXCEPTIONAL CIRCUMSTANCES ONLY A STUDENT MAY BE PERMITTED TO CHANGE CAMPUSES FOR THE SAME QUALIFICATION..

STUDENT NO: _____ **TITLE:** _____ **SURNAME:** _____

FIRST NAMES: _____

ADDRESSES

Postal: _____ **Term** _____
_____ **Code:** _____ _____ **Code:** _____

Tel no: _____ **Cell No:** _____ **E-mail:** _____

PRESENT DEGREE/DIPLOMA/NON-DEGREE REGISTRATION

Degree/Diploma e.g. BAHons: BSc: _____ Campus e.g. HC, Pmb, Wville: _____ College: _____

Level of study _____ Full/Part time _____ Programme _____

Majors: 1 _____ 2. _____

PROPOSED DEGREE/DIPLOMA

Year of Entry: 20 _____ Entry Term e.g. Semester 1, Semester 2: _____

Degree/Diploma e.g. BAHons: BSc: _____ Campus e.g., Pmb, Wville: _____ College: _____

Level of study _____ Full/Part time _____

Proposed Programme/Discipline _____

COMMENTS/DECISIONS:

Programme Director: _____

Signature: _____ Date: _____

Head of School: _____

Signature: _____ Date: _____

Dean: _____

Signature: _____ Date: _____

RESIDENCE:

Will University Residence be required? Yes/No:

IF UNIVERSITY RESIDENCE IS REQUIRED A SEPARATE APPLICATION FOR ADMISSION TO RESIDENCE MUST BE COMPLETED. THIS FORM IS AVAILABLE FROM THE STUDENT HOUSING/RESIDENCE OFFICE.

FINANCIAL ASSISTANCE:

Are you in receipt of assistance from Financial Assistance Service this year? Yes/No:

RETURNING STUDENTS MUST APPLY FOR FUNDING FROM THE FINANCIAL ASSISTANCE SERVICE BY 31 AUGUST EACH YEAR

DECLARATION BY THE APPLICANT

I hereby declare that the information supplied is true and accurate. **Date:**..... **Signature:**.....