

UNIVERSITY

Application for Admission to

STUDENT NUMBER

Post-graduate Studies in 20......

	 A candidate wishing to register for the first time at the Nelson Mandela University must please complete an application form for admission to the University as well as this form, and submit them together with the following: (i) a certified copy of your degree and/or diploma certificates; (ii) a complete academic record(s) issued by the previous university(ies) 2. The enclosed information for candidates for Honours or Masters' and Doctors' degrees must be read carefully. Please retain it for future 								
			A. F	Field of	f stud	у			
1.	2nd				•••••				
2.	Department (e.g. H	listory)							
3.	3. Type of proposed registration (indicate with an x)								
	1. Full-time	2. Part-time							
1.		. Your name a					e must be direct		
3.	Title:	4. Initials	5. E-mail ad	dress:					
6.	Address				-	Code:	No.:	(W)	
				7		Code:	No.:	(H)	
						Cell:			
		C. Academ	nic particulars: D		s/Dipl	omas alı			
L		Year Degree or Diploma					University/College		
1.									
2.									
3.									
4.									
l h	ave read the enclos	ed information fo	or post-graduate stu	dents.					
S	ignature of Applican	t:				Date:			

For Office Use Only

D. Recommendation of Head of Department								
1. Recommended Not Recom	nmended							
2. Recommended supervisor/promoter								
Recommended supervisor/promoter								
3. Must the staff credit in respect of this candidate be distributed between two (or more) departments? (if applicable) Yes No								
If yes, please indicate the departments and distribution								
Departments	Distribution %							
Signature:	Date:							

FAB 150 (2) Nelson Mandela University 696 (12/04)