



APPLICATION FOR ADMISSION FOR FIRST ENTERING HONOURS, MASTERS OR DOCTORAL DEGREES

A PARTICULARS OF APPLICANT

Name :	Student no :
Postal Address :	Tel No : Home:
	Work :
	Cell :
E-mail address:	

B INFORMATION REQUIRED FOR HONOURS DEGREE ADMISSION

1. TO BE COMPLETED BY STUDENT / FACULTY ADMIN OFFICE	
1.1 Bachelor's degree or equivalent qualification obtained	
1.2 Institution where Bachelor's degree or equivalent qualification obtained	
1.3 Duration of Bachelor's degree or equivalent qualification	
1.4 Years to complete Bachelor's degree or equivalent qualification	
1.5 Subject intended for Honours degree	
1.6 Final Bachelor's degree or equivalent mark (or average of final marks) in subject	
1.7 <u>International students:</u>	

2. TO BE COMPLETED BY RELEVANT HEAD OF DEPARTMENT (Mark with X). Only one of the following to be completed		
Recommendation by the Head of Department who confirms that the applicant complies/not complies with all admission requirements as stipulated by the Faculty, School and Programme Rules.	Recommended	
	*Conditional recommendation	
	*Not recommended	
DEPARTMENT:		
INITIALS & SURNAME OF HOD	SIGNATURE	DATE
*COMMENTS:		
INITIALS & SURNAME OF DIRECTOR	SIGNATURE	DATE
*COMMENTS:		
INITIALS & SURNAME OF ED	SIGNATURE	DATE
*COMMENTS:		

C. INFORMATION REQUIRED FOR MASTERS / DOCTORAL DEGREE ADMISSION

1. TO BE COMPLETED BY APPLICANT: History On Honours / Masters Degree Obtained	
1.1 Degree obtained	
1.2 University obtained from	
1.3 Major Subjects and symbol/percentage	
1.4 Dissertation title and percentages obtained	Title:
	% Obtained:
2. TO BE COMPLETED BY APPLICANT: Contemplated degree	
2.1 Masters Degree	
2.2 Doctors Degree	
2.3 Faculty	Science and Agriculture

2.4	Department		
2.5	Field of Study		
2.6	Proposed title of dissertation/thesis		
3. TO BE COMPLETED BY RELEVANT DEPARTMENT: PARTICULARS OF SUPERVISORS (CV's of Supervisors /Co-supervisors must be attached, if not from the University)			
SUPERVISOR			
Name			
Qualification			
Present Position			
Institution			
Signature			
CO-SUPERVISOR			
Name			
Qualification			
Present Position			
Institution			
CO-SUPERVISOR			
Name			
Qualification			
Present Position			
Institution			
4. TO BE COMPLETED BY RELEVANT HEAD OF DEPARTMENT			
		Recommended	
		*Conditional recommendation	
		*Not recommended	
DEPARTMENT: BIODIVERSITY			

INITIALS & SURNAME HOD	SIGNATURE	DATE
*COMMENTS:		
INITIALS & SURNAME DIRECTOR	SIGNATURE	DATE
*COMMENTS:		
INITIALS & SURNAME OF ED	SIGNATURE	DATE
*COMMENTS:		