Application for POSTGRADUATE academic admission and on-campus residence (Postgraduate Diplomas, Honours, Masters and Doctorates)

Year: [ ]
Indicate the year you wish to commence studies

NB! Please take note of the minimum admission requirements before completing this application form.
(Available from the prospectus)

Please indicate by ticking the applicable box

Student type
☐ South African student ☐ International student

University Campus
☐ Port Elizabeth ☐ George

Surname

Initials

Student number

Have you consulted with the relevant Department before applying?
☐ Yes ☐ No

Name of qualification (Postgraduate Certificate, Postgraduate Diploma, Honours (e.g. BSc Hons: Chemistry), Masters, Doctoral Degrees)

Full Research ☐ Coursework ☐

Field of study

Full-time ☐ Part-time ☐
Checklist for applicants

(Please note that your application form cannot be processed if you have not included all the relevant documents. Please use the checklist below to ensure that you have included all the required documents before you submit your application form).

- Certified copy of your ID document/Passport copy: for international students
- Certified copy of matric certificate/school leaving results
- Certified copies Diploma/Degree certificate(s)
- Academic record(s) and certificate(s) of conduct from previous institution (with English translations where applicable)
- Certified copy of marriage certificate (where applicable)
- Proof of payment of your application fee
- A synopsis of the intended field of research (for research master's/doctoral candidates only)
- An abstract of your Master's degree research dissertation or treatise (for doctoral candidates only)
- Proof of having completed a course in research methodology (if applicable)
- SAQA certificate for qualifications obtained at a non-South African institution

1. Application (all qualifications) for academic admission: 20 ____ intake (please indicate year)

No application fees for South-African applicants.
Online as well as manual applications.................................FREE

Before completing the application form, please take note of the minimum admission requirements for the qualification that you are applying for (Website: mandela.ac.za/application) or refer to the relevant course guide.

Please note: applications for postgraduate study are open throughout the year, however, various programmes have various closing dates so please check with the relevant faculty before applying.

2. International students

International Student Fees.................................R500
You may remit your application fee by telegraphic transfer or bank draft. The bank details are as follows:

Account name: Nelson Mandela University – Main
Bank name: Standard Bank
Bank address: Rink Street, Port Elizabeth, South Africa
Bank swift code: SBZAZAJJ

Internet banking code: 051001
Nelson Mandela University ref. no: 5350 4605 & Student name
Branch code: 050417

Student name & passport number: Please state on deposit slip

All enquiries with regard to application, admission, orientation, accommodation, study permits etc can be sent to international@mandela.ac.za or you can visit their website at mandela.ac.za/international or contact the international Admissions Office at +27 (41) 504 2161.

3. Students transferring from other tertiary institutions

If you were previously registered at other tertiary education institutions, other than Nelson Mandela University, you need to submit a full academic record and certificate of conduct issued by each institution at which you were registered. This statement must indicate all modules passed and failed and modules for which you are currently registered. Students who studied at the Port Elizabeth campus of the former Vista University before 2004 must obtain an academic record and a certificate of conduct from UNISA. (Tel: 086 167 0411 or e-mail: undergrad@unisa.ac.za)

4. Postgraduate funding

Consult with the Research Capacity Development Office at RCD@mandela.ac.za or 041 504 2358 for Honours, Masters and Doctoral funding. Applicants need to be aware that postgraduate funding opportunities are highly competitive and furthermore, the majority of calls for applications become available during the previous academic year.

5. Students living with special needs/disabilities (indicate any changes)

We strive to ensure that all campus facilities are accessible to students living with special needs/disabilities. Every reasonable attempt will be made to provide students with the assistance they may require. Disability status is confidential. However, if the university is not aware of the special need/disability, we will not be in a position nor obliged to make reasonable accommodations. If the special need/disability is not self-evident, the institution may require the applicant to disclose sufficient information to confirm the special need/disability or to ensure that reasonable accommodation is granted.

For more information on accessibility and how your particular special need/disability can be accommodated, you are advised to contact the Disability Office, on 041 504 2562/2313/4756 or e-mail: disability@mandela.ac.za as early as possible. Early enquiries during the year preceding application are encouraged, to ensure that requests can be reasonably accommodated.
6. Residence applications

• To apply for a place in an accredited on-campus residence, please complete Section G at the end of the application form.
• Please note that indicating that you require accommodation does not guarantee you a place in the residences as residence accommodation is limited.
• Applications for residence accommodation is subject to a selection process.
• No student will be admitted to residence until she/he has been academically admitted to a university programme.
• Please include proof of your current residential/home or postal address with your application form.

7. Changes after submitting an application

Kindly advise the Admissions Office in writing if your address should change or if you would like to change qualification after submitting this form. You are advised to contact the Admissions Office at 041 504 2593/1111/3619, should you decide not to proceed with your application.

8. Student number

Please use your student number when corresponding with the university. This student number will appear in all future correspondence that you receive from the university.

9. Medium of instruction and academic activities

Tuition is presented in English. Academic activities take place from Monday to Friday and when necessary, on Saturdays.

10. Selection of Post Graduate candidates

Submission of a completed application form does not mean that you have been accepted as a student, or that you may register. All applicants will be notified of the outcome of their application. All prospective students are selected in accordance with the admissions policy of the university. Certified copies of the required certificates must be attached to your application form. Prospective students will be notified via sms and can also track their application online (mandela.ac.za/application)

Please do not send original certificates in the post.

Acceptance as a student does not mean that you have also been accepted at one of the residences or that you will automatically qualify for postgraduate funding.
APPLICATION FOR ADMISSION

Instructions

Use CAPITAL LETTERS to complete this form or place an X in the correct box. Please use a black pen. Kindly complete the form in FULL and answer all the questions. Application forms that are not completed and do not include the required documentation may not be processed. In this case your application form will be returned to you which may delay the application process.

<table>
<thead>
<tr>
<th>Nationality / residence status</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ South African citizen</td>
</tr>
<tr>
<td>☐ Foreign with permanent residence permit</td>
</tr>
<tr>
<td>Foreign applicants must submit proof of permanent residency</td>
</tr>
</tbody>
</table>

If you are not a citizen of South Africa kindly indicate

- Passport number ............................................................
- Expiry date ......................................................................

Population group (information required by the Department of Higher Education & Training in respect of SA citizens only)

- Black
- Coloured
- Indian
- White
- Other

Accommodation

Do you require accommodation? ☐ Yes ☐ No

Accommodation may be provided for full-time registered students
SECTION B

This information will not disadvantage your application

Do you have any disabilities/special needs  
[ ] Yes  [ ] No

If yes, please indicate:

- Sight (conditions corrected with spectacles are not applicable)
- Hearing (even with hearing aid)
- Communication (talking, listening)
- Physical (moving, standing)
- Intellectual (difficulties in learning)
- Emotional (behavioural or psychological)
- Multiple

Please provide more details regarding your disability/special needs (e.g. partially sighted, wheelchair user, degree of deafness). Every reasonable attempt will be made to provide you with the assistance you may need as a result of your disability. You must provide the university with the necessary information about your disability/special need status at the time of your application by completing and attaching the disability/special need assessment form. You are required to submit supporting documentation with your application. The relevant form will be posted to you or can be downloaded from the admissions office webpage.

Please provide more information if you have ticked any of the above.

................................................................................................................................................................................................................
................................................................................................................................................................................................................
................................................................................................................................................................................................................
................................................................................................................................................................................................................
................................................................................................................................................................................................................
.................................................................................................................................................................................................................
PLEASE NOTE: It is your responsibility to inform the university in writing should any of these addresses change.

<table>
<thead>
<tr>
<th>Your home / residential address</th>
<th>Next of kin address (e.g. parents, spouse)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title........................................ Number.................................................</td>
<td>Title........................................ Number.................................................</td>
</tr>
<tr>
<td>Address ......................................................... ........................................</td>
<td>Address ......................................................... ........................................</td>
</tr>
<tr>
<td>................................................................. Postal code .........................</td>
<td>................................................................. Postal code .........................</td>
</tr>
<tr>
<td>Tel (Home): Code .................. Number......................................................</td>
<td>Tel (Home): Code .................. Number......................................................</td>
</tr>
<tr>
<td>Tel (Work): Code ................... Number......................................................</td>
<td>Tel (Work): Code ................... Number......................................................</td>
</tr>
<tr>
<td>Fax .................................................. Cell........................................</td>
<td>Fax .................................................. Cell........................................</td>
</tr>
<tr>
<td>E-mail address................................. ........................................</td>
<td>E-mail address................................. ........................................</td>
</tr>
</tbody>
</table>

SECTION C

School Leaving Details

(Information required by the Department of Higher Education and Training)

Please complete the section if you were previously registered at another university, university of technology or private college. Please supply full particulars of every year of registration, irrespective of whether or not any modules were passed. Certified copies of formal academic qualifications must be submitted. An original academic record and certificate of conduct must also be submitted. (with English translations where necessary).

Student no............................................ from year.......................... to year ..................................
Name of degree / diploma................................................................................................................. Awarded Yes □ No □
Institution................................................................................................................................. Country........................................
Student no............................................ from year.......................... to year ..................................
Name of degree / diploma................................................................................................................. Awarded Yes □ No □
Institution................................................................................................................................. Country........................................
Student no............................................ from year.......................... to year ..................................
Name of degree / diploma................................................................................................................. Awarded Yes □ No □
Institution................................................................................................................................. Country........................................

Have you ever been disqualified or refused admission / re-admission at another tertiary educational institution? Yes □ No □
If I am admitted as a student to the university, I undertake to:

1. Perform such work as may be assigned to me by members of staff and to conform to all the rules and regulations laid down by the university.
2. Acquaint myself with all the rules, policies and procedures applicable to the qualification for which I enrol; I have also acquainted myself with the fees payable as stipulated by the university.
3. I acknowledge that the rules, policies and procedures and instructions referred to in 1 and 2 above are subject to amendment without notice.
4. I undertake to immediately notify the Faculty Administration Office in writing if I change or cancel my registration. I further undertake, if applicable to me, to immediately notify my legal guardian and/or the person who assumes liability for payment of the fees owing by me if I change or cancel my registration and to provide the said person with all accounts received from the university. I further acknowledge that such cancellation is not valid unless given in writing.
5. I am aware that my registration is valid only if it complies with the rules of the qualification concerned, notwithstanding the acceptance of this registration by the university.
6. The fees and conditions shall be determined by the Council and are subject to amendment without prior notice. I undertake to pay all fees prescribed by the university in respect of any module/qualification for which I register, by the due date as well as all other fees, which may be owing by me to the university. I further note and accept liability for payment of interest as stipulated by the university from time to time in the event of my failing to pay fees for which I am liable by the prescribed date. In the event of the university successfully instituting legal action against me for the recovery of any amounts owing, due and payable or the enforcement of any legal rights of the university, I shall be liable to pay all legal costs incurred on an attorney and client scale, including collection commission and interest. I agree that the university may provide me with statements of account and any other communiqués by way of electronic communication through data messages. These data messages may be sent to the cellular number provided by me. I am also prepared to accept such messages at my University student e-mail address or at an alternative e-mail address nominated by myself in writing.
7. I accept that my examination results, certificate/diploma/degree and study record may be withheld under the following circumstances:
   7.1. in the event of my student account being in arrears or
   7.2. in the event of any disciplinary matter pending against me.
8. I understand that if after registration it is found that my tuition fees or residence account or any other monies including the cost for the replacement of library materials owing to the university have not been paid by the prescribed date, my registration may be cancelled. Failure to pay residence fees by the date stipulated by the university may result in my eviction from the residences.
9. I will immediately notify the Admissions Office, in writing, if I change my address.
10. Should I, during the course of my studies at the university, sustain any injuries or contract any illness or suffer loss or damages, I hereby undertake not to institute any claim against the university on account thereof, irrespective of the cause of such damages or loss. In the event of my death during the course of my studies, this undertaking shall be binding on the executor of my estate and my heirs and successors-in-title. Under the circumstances referred to, I or my executor, administrator, heirs and successors-in-title (in the event of my death) hereby indemnify the university in respect of any damages suffered by me from any of the causes referred to above.
11. I understand and accept that any work produced by me during my studies or research at the university which may be the object of an intellectual property right, as well as any data or information collected or obtained by me, shall remain the property of the university, and I undertake not to alienate, transfer or make known such to any other party without the written permission of the university.
12. I hereby undertake not to institute any claim against the university on account thereof, irrespective of the cause of such damages or loss. In the event of my death during the course of my studies, this undertaking shall be binding on the executor of my estate and my heirs and successors-in-title. Under the circumstances referred to, I or my executor, administrator, heirs and successors-in-title (in the event of my death) hereby indemnify the university in respect of any damages suffered by me from any of the causes referred to above.
13. I declare that the proposed dissertation or thesis has not been undertaken at another tertiary institution.
14. I declare that I am not currently registered at another tertiary institution.
15. I declare that I am not currently registered at another tertiary institution.
16. I declare that I am not currently registered at another tertiary institution.
17. I declare that I am not currently registered at another tertiary institution.

SIGN HERE

APPLICANT

First name(s) .......................................................... Surname ..........................................................

Signed at .......................................................... on the .......................................................... of .......................................................... 20 ............

Signature / thumb print ..........................................................
SECTION E
Declaration by applicant’s parent/legal guardian/surety

(To be completed only if the applicant is a dependant; or does not / will not have permanent employment
must have their legal guardian/parent or surety complete this section and sign on the next page)

Details of parent/legal guardian/surety

Name..........................................................................................................................................................

Surname ...................................................................................................................................................

Identity number of parent/legal guardian/surety ......................................................................................

Home address ...........................................................................................................................................

.......................................................................................................................................................... Postal code .................

Home telephone number: Code ....................... Number..............................................................................................

Fax ......................................................................................................................... Cell........................................

E-mail address ........................................................................................................................................

Relationship to applicant (eg. father, uncle, aunt etc.) ..............................................................................

Employer’s name (proof of employment must be provided) ......................................................................

Employer’s address ...................................................................................................................................

.......................................................................................................................................................... Postal code .................

Work telephone number: Code ....................... Number..............................................................................................

Fax ......................................................................................................................... Cell........................................

E-mail address ........................................................................................................................................

..........................................................................................................................................................

1. I confirm that I am the legal guardian of the applicant and agree to the provisions contained in the declaration of the applicant.

2. I agree to any change in degree, diploma or module that the applicant may take. The university shall not be responsible if the
applicant abandons his/her studies or leaves the university.

3. I apply on behalf of the applicant in my personal capacity for his or her registration as a student at the university and hereby bind
myself as surety and principal co-debtor for all fees due and payable owing to the university by the applicant.

4. If so far as it may be applicable to me, I undertake, should the applicant be admitted to the university to:
   4.1. comply with all the rules and regulations of the university
   4.2. acquaint myself with all the rules, regulations and instructions applicable to the qualification for which the applicant enrolls.

5. I shall be personally liable for payment of all fees, which may become due to the university in terms of this application and I renounce
the benefits of exclusion, division and cession of action should any action be taken by the university for the recovery of fees owing,
due and payable to the university by either myself or the applicant.

6. I indemnify the university against any claim against the university arising out of any injuries, loss or illness suffered or contracted by
the applicant, myself or any third party representing myself or the applicant during the course of or arising out of his/her studies at
the university, irrespective of the cause of such damages, illness or loss.

7. I undertake not to institute any claim against the university on account of any injuries or loss suffered or illness contracted by the
applicant during the course of or arising from his/her studies at the university.

8. The fees and conditions shall be determined by the Council and are subject to amendment without prior notice. I undertake to
pay all fees prescribed by the university in respect of any module for which I register by the due date as well as other fees, which
may be owing to the university. I further note and accept liability for payment of interest as stipulated by the university from time to
time in the event of my failing to pay fees for which I am liable for by the prescribed dates. In the event of the university successfully
instituting legal action against me for the recovery of any amounts owing, due and payable or the enforcement of any legal rights
of the university, I shall be liable to pay all legal costs incurred on an attorney and client scale, including collection commission and
interest. I have furthermore noted that all accounts in respect of the applicant will be sent to him/her to check for accuracy and that it
is the said applicant’s duty to make accounts concerned available to me for settlement.
I agree that the university may provide me with statements of accounts and any other communiqués by way of electronic communication through data messages. These data messages may be sent to the cellular number provided by the student. I am also prepared to accept such messages at the students university e-mail address. I also accept that such messages may be received by myself at the cellular or e-mail contact details provided by the student in terms of paragraph 6 of Section F.

9. I understand that the registration of the applicant may be cancelled or examination results may be withheld, if I fail to pay any fees owing, due and payable to the university in respect of the applicant on the due date without any prejudice to any rights, which the university may have in respect of the recovery of such fees.

10. Failure to pay the residence fees by the date stipulated may result in the applicant being evicted from the residences.

11. In the event of the university successfully instituting legal action against me for the recovery of any amounts owing, due and payable or the enforcement of any rights of the university, I shall be liable to pay all legal fees on an attorney and client scale, including collection commission and interest.

12. I declare that I have not been declared insolvent by a competent authority or any court of law on the date of signing this agreement.

13. I declare that the information supplied by me on this form is, to the best of my knowledge, true and correct.

**SIGN HERE** PARENT/LEGAL GUARDIAN/SURETY

First name(s) ................................................................. Surname .................................................................

Signed at ................................................................. on the ................................................................. of ................................................................. 20 .................................................................

Signature of parent/legal guardian/surety .................................................................

NB: A copy of the first page of the identity document of the parent / legal guardian / surety must be submitted.

WHERE DID YOU HEAR ABOUT OUR UNIVERSITY, OR WHAT MADE YOU DECIDE ON US AS A STUDY OPTION?

Choose as many as are applicable.

- [ ] Newspaper adverts
- [ ] From your friends or family
- [ ] From the Internet (website)
- [ ] Radio adverts
- [ ] From career expo’s
- [ ] Visit to the university
- [ ] Billboards
- [ ] TV Ad
- [ ] Facebook
- [ ] Twitter
- [ ] YouTube
- [ ] Instagram

Your employment details (If full-time employment or self employed)

Name of employer ................................................................. Telephone number ................................................................. E-mail address .................................................................

Please tick or specify the appropriate industry you work in

- [ ] Agriculture/Forestry
- [ ] Automotive Components
- [ ] Automotive Dealers
- [ ] Automotive Manufacturing
- [ ] Banking
- [ ] Community/ Social Services
- [ ] Construction/ Civil Engineering
- [ ] Security Services
- [ ] Education
- [ ] Financial Services
- [ ] Governmental Local
- [ ] Governmental Regional
- [ ] Hospitality/ Restaurant Industry
- [ ] Legal
- [ ] Marketing and Sales
- [ ] Medical/Health Care
- [ ] Mining
- [ ] Petro/Chemicals
- [ ] Retail
- [ ] Technology/ Telecommunication
- [ ] Travel/Tourism
- [ ] Other Manufacturing
- [ ] Other (please specify)
Applicants for postgraduate research studies are expected to be specific regarding what they intend working on. A 5-6 page typewritten document should be provided containing: 1. A proposed topic; 2. A very brief description of the research 'problem/question; and 3. A short list of the relevant sources (journals, treaties, cases, writings).
**SECTION G**

Application for on-campus residences

(This form should be completed in BLOCK CAPITALS)

**Closing date:** 30 September

**Contact details for residence applications**

Port Elizabeth: 041 504 3690 | George: 044 801 5034 | resadmissions@mandela.ac.za

**Student number** (for office use only)

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please note: You must provide proof of your current residential/home address with your on-campus application form.

If this is not included your application will not be processed.

**Personal details**

<table>
<thead>
<tr>
<th>Title</th>
<th>Initials</th>
<th>Surname</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>First name(s) in full</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of birth</th>
<th>Nationality</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If South African, state the province………………………………………...and the nearest city:..........................

Contact details: Home (......)......................................................................................Cell phone ...........................................................

E-mail .................................................................................................................................................................

Are you an applicant with a disability? ☐ Yes ☐ No

If yes, please inform us of your special needs:...........................................................................................................................

Nelson Mandela University must be informed of certain disabilities in order to plan reasonable accommodations and support, to accommodate persons with disabilities. Advice can be obtained from the University Disability Unit at 041 504 2313/ 4756/2562 or e-mail: disability@mandela.ac.za

**Population group** (information required by the Department of Higher Education & Training)

- [ ] African
- [ ] Coloured
- [ ] Indian
- [ ] White

<table>
<thead>
<tr>
<th>Gender</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Non-academic activities**

Hobbies/sports...............................................................................................................................................................

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Academic activities**

Qualification (certificate, diploma or degree) you will be pursuing...........................................................................

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Academic level of study (first year, senior, BTech / honours, masters / PhD)...................................................................

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
1. The process which your application will follow is:

13.1 Receipt of your application for on-campus residence will be acknowledged but this does not guarantee a place in residence;

13.2 Your application will be sent to the Department of Housing, Living & Learning Programmes, for consideration;

13.3 A selection process has to take place and only applicants who have been admitted into a university programme will be provisionally admitted into a university residence provided that space is available. Priority will be given to students who have obtained good academic results;

13.4 Final acceptance into residence, for first year students, will depend on your final examination results. A letter of regret will be sent to you if you fail to get acceptance into residences as a result of not meeting the academic requirements as stipulated.

13.5 Students are advised to come to residence only if they have received acknowledgement of admission to residence.

2. Students living in the Nelson Mandela Bay Metropole will not be considered for on-campus accommodation. Exception to this rule will be considered upon written motivation to the Director: Housing, Living & Learning Programmes.

3. The university residences support the living and learning philosophy by providing programmes which will help ease the first-year student’s transition from high school and home to living independently and succeeding academically. Students are grouped together so that common academic interests are shared and where opportunities to learn from each other are created.

4. As a first-year student, you may feel isolated, homesick, lost and unsure when arriving at university. Each first-year student will be part of a mentoring group and attendance of the mentoring sessions is compulsory.

5. All first-year students are expected to share rooms. There are shared rooms in Xanadu (South Campus) and Letaba (North Campus) for males and Melodi (South Campus) and Lebombo (North Campus) for females, and Oceana (Second Avenue Campus) for males and females in separate buildings.

6. All students are expected to access the Meal Management System (MMS). This is a meal booking and billing system that manages student meal accounts for purchases of meals at food outlets on the different campuses and manages the pre-bookings of meals at residences and other specific venues. Registering for the MMS is done during the official registration periods when students register for academic purposes as well as for accommodation. Each student will have their own meal account in the MMS where a record of all transactions will be kept. Money must be paid into the MMS in order to create a positive balance against which all transactions will be deducted.

7. Nelson Mandela University accepts no responsibility for a student’s personal property. Please ensure that you are insured against such eventualities.

8. Resident students undertake to be bound by the current residence regulations. Always ensure that the rules and regulations are well known to you as no excuse will be accepted to the contrary if challenged for misconduct.

9. There is a 24-hour security service to ensure the safety of students and their belongings. Close circuit cameras are situated in strategic places within the residences. The university’s security and residence managers can be contacted at any time in cases of emergency.

10. In the event of space on campus not being available to you, it is recommended that you approach the off-campus, privately-owned residences (Laboria and South Point) or contact the off-campus accommodation manager for assistance.

---

**If you wish to stay in accredited off-campus Nelson Mandela University housing, please contact the following office:**

**Off-campus Housing office**

Sanlam Student Village (South Campus) • T 041 504 4736/2921 • E offcampus.accommodation@mandela.ac.za • W ocho.mandela.ac.za

---

**Sign Here**

I .................................................. accept that if any of the above-mentioned is not attended to/or not included that this application will not be finalised.

Signed at ........................................ on the ................................... of ............................................. 20............................

Sign here / Thumb print ..........................................................
Student Name: .............................................................................................
Student Number: .........................................................................................

Recommendation of Head Of Department (please tick the relevant box and complete the form)

☐ Fully complies with the prerequisites of the qualification and CAN be admitted to .................................................................

☐ Provisionally complies with the prerequisites of the qualification and can be admitted to study provided that:.................................................................

........................................................................................................................................................................................................
........................................................................................................................................................................................................

☐ Does NOT comply with the prerequisites of the qualification and CANNOT be admitted to study.................................................................

Additional comments: ........................................................................................................................................................................................
........................................................................................................................................................................................................

Signature of Head of Department:..........................................................Recommended Supervisor / Promoter:..........................................................
Recommended Joint Supervisor / Promoter:..........................................................Acceptance by Supervisor / Promoter:..........................................................
Print Name................................................................................................................Signature ..........................................Date: ..........................................................

For office use only

Office for International Education Credentials Evaluation Comments  ☐ Accredited  ☐ Not Accredited
Average Grade for Qualification: ...........................................................
Comparable to SA:  ☐ Diploma  ☐ Degree  ☐ Hons Degree  ☐ Masters Degree  ☐ Other:..........................................................
Comments (International Office):..............................................................................................................................................................
........................................................................................................................................................................................................
........................................................................................................................................................................................................

Please tick the appropriate representative response:

☐ Applicant invited by Faculty to finalise research proposal (visit at the expense of the STUDENT)  Faculty to indicate date of visit

☐ Application pending (request additional information):...........................................................

Faculty representative signature:.............................................................................................................Date:........................................

PLEASE RETURN COMPLETED APPLICATION TO THE OFFICE FOR INTERNATIONAL EDUCATION FOR THE ATTENTION POST-GRADAUTE OFFICER (X2161)

All international full research M&D students are required to spend at least nine (9) months on campus during the completion of their qualification, this includes time spent on campus to finalise research proposal.
Our Vision
To be a dynamic African university, recognised for its leadership in generating cutting-edge knowledge for a sustainable future.

Our Mission
To offer a diverse range of life-changing educational experiences for a better world.

- Diversity
- Excellence
- Ubuntu
- Social justice and equality
- Integrity
- Environmental stewardship
Contact us:

Port Elizabeth Campuses
Admissions Office
A PO Box 77000, Nelson Mandela University, Port Elizabeth, 6031, South Africa
(South, North, 2nd Ave, Bird Street, Ocean Sciences & Missionvale campuses)
T +27 41 504 1111
F +27 41 504 2574/1917

George Campus
Admissions Office
A Private Bag X6531, George, 6530
T +27 44 801 5111
F +27 44 801 5031

E info@mandela.ac.za or george-info@mandela.ac.za
W mandela.ac.za/application or myfuture.mandela.ac.za

International Office
T +27 41 504 2161
F +27 41 504 2771
E international@mandela.ac.za
W international.mandela.ac.za

Nelson Mandela University Business School
A PO Box 77000, Nelson Mandela University, Port Elizabeth, 6031
T +27 86 150 4500
F +27 44 801 5031
E business.school@mandela.ac.za
W mba.mandela.ac.za

Change the World

mandela.ac.za