University of KwaZulu-Natal

**DOCTORAL RESEARCH SCHOLARSHIP: 2015**

**CONDITIONS OF AWARD:**

1. Four (4) Doctoral Research Scholarships are available each year in order to encourage research efforts within the University.
2. The value of the scholarships is determined each year and shall be the estimated cost of a year of postgraduate study.
3. The scholarships are for full-time Doctoral study.
4. The tenure of the scholarships shall be for one year, renewable for a further two years, subject to satisfactory progress. Renewable value may vary.
5. One scholarship will be awarded per College. No award will be made if there are no applications of sufficient quality.
6. Only application forms completed in full by all parties will be considered by the Scholarships Awards Committee (candidate, supervisor, dean and head of school). Applications must be lodged with the relevant College by the closing date.
7. As a minimum, applicants are expected to have their research proposals accepted by the relevant School Higher Degrees committees, and to include minuted confirmation of this with their application.
8. Applicants who are about to submit their doctoral theses for examination are not generally considered for the UKZN doctoral research scholarship.
9. Candidates for the award of the UKZN doctoral research scholarship are generally those who are ranked in the top 5 percent in the categories of intellectual strength, research aptitude and purposefulness as motivated by evidence and *reasoned argument* by Heads/leaders.
10. Evidence of publication(s) in the relevant research area lends strength to applications.
11. The quality of the previous academic record of candidates is considered, with the greatest weight attached to the most recent (usually masters) record, and with particular consideration given to the time taken to complete the masters qualification.

**INTERNAL CLOSING DATE : FRIDAY, 6 MARCH 2015**

**COMPLETED FORMS MUST BE SUBMITTED TO THE FINANCIAL AID ADVISOR IN YOUR COLLEGE.**

University of KwaZulu-Natal

**APPLICATION FOR DOCTORAL RESEARCH SCHOLARSHIP: 2015**

***NOTE: This application must be accompanied by*:**

1. *A three-page (maximum)summary of your research proposal addressing, inter alia, the nature and purpose of the study; the research problems that will be investigated/hypotheses to be tested; the research design; and the availability of data and other relevant resources.*
2. *A full Curriculum Vitae.*
3. *Full Academic Transcript from each institution listed in section B.*

**SECTION A**: PERSONAL DETAILS

SURNAME :--------------------------------------------------------------------------------TITLE------------------

FIRST NAMES :-----------------------------------------------------------------------------------------------------------

CORRESPONDENCE ADDRESS:--------------------------------------------------------------------------------------

-------------------------------------------------------------------------------------------CODE------------------------------

TELEPHONE NUMBERS: HOME:-------------------------------------BUSINESS: ---------------------------------

CELL: ----------------------------------------------E-MAIL: --------------------------------------------------------------

**SECTION B**: EDUCATIONAL QUALIFICATIONS

Please list here all previous attendance at tertiary educational institutions:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **NAME OF**  **INSTITUTION** | **YEARS OF**  **ATTENDANCE** | **QUALIFICATION**  **GAINED** | **YEAR**  **QUALIFICATION**  **GAINED** | **STUDENT**  **NUMBER** |
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***NOTE****: This application must be accompanied by the full academic record at each institution listed above*.

## SECTION C: PROPOSED PhD STUDIES/RESEARCH

SCHOOL & COLLEGE:---------------------------------------------------------------------------------------------------

CENTRE: DURBAN/MEDICAL SCHOOL/PM BURG/WESTVILLE/EDGEWOOD

RESEARCH TOPIC / FIELD OF STUDY:

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PROBABLE DURATION OF STUDY/PROJECT : FROM:------------------------TO:----------------------------

NAME AND EMAIL ADDRESS OF SUPERVISOR:----------------------------------------------------------------

-----------------------------------------------------------------TELEPHONE NO.: ---------------------------------------

CENTRE : DURBAN/MEDICAL SCHOOL/PIETERMARITZBURG/WESTVILLE/EDGEWOOD

**SECTION D**: ADDITIONAL INFORMATION (Enclose documentary proof, if applicable)

I wish the following additional facts to be taken into consideration:

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DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ APPLICANTS SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION E**: CONFIDENTIAL REPORT OF PREVIOUS THESIS SUPERVISOR (Where applicable)

(Previous thesis supervisor to comment on applicant’s academic and research capabilities)

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NAME OF PREVIOUS SUPERVISOR : -------------------------------------------------------------------------

DESIGNATION : -----------------------------------------------------------------------------------------------------

SIGNATURE: --------------------------------------------- DATE: -----------------------

**SECTION F:** CONFIDENTIAL REPORT BY HEAD OF SCHOOL

CANDIDATURE (qualifications and research proposal) AND APPOINTMENT OF SUPERVISOR APPROVED BY COLLEGE /HIGHER DEGREES COMMITTEE:

DATE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_COMMITTEE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MINUTES ITEM NUMBER:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE WHEN DETAILED PROTOCOL OF RESEARCH PROJECT IS EXPECTED:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In your judgement, where does the candidate fall among persons at his/her level in your School in recent years? Indicate by placing a cross in the block relevant to each of the following characteristics:

|  |  |  |  |
| --- | --- | --- | --- |
| **CHARACTERISTIC** | **TOP 5%** | **TOP 30%** | **LOWER 70%** |
| Intellectual Ability |  |  |  |
| Research Aptitude |  |  |  |
| Purposefulness |  |  |  |

If necessary, expand on particular aspects of the candidate’s abilities and applicable background, and the particular requirements of the project, which you consider important in assessing this application.

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SIGNATURE:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DATE :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME : (Please Print)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CENTRE :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CHECKLIST :**

***Have you attached/inserted the following documents to your application***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. A three page summary of your research proposal | Yes |  | No |  |
| 1. Full Curriculum Vitae (no copies of certificates) | Yes |  | No |  |
| 1. Full Academic Record | Yes |  | No |  |
| 1. Reference letters | Yes |  | No |  |
| 1. Has Section E been completed by your Thesis Supervisor | Yes |  | No |  |
| 1. Has Section F been completed by the Head of School | Yes |  | No |  |
| 1. Have you signed your application form | Yes |  | No |  |