

APPLICATION FOR A POSTDOCTORAL FELLOWSHIP

1 PERSONAL INFORMATION

First Name:				Surname:			
Middle Name:				Citizenship:			
Date of Birth:		Gender:		Race:		Nationality:	
ID/Passport No:							
Proposed School:				Proposed Campus:			
Email:				SA Contact No(s):			
Student No (UKZN students/ex-students only):							
Doctoral Qualification:							
Qualification	Topic		University		Year	Supervisor	

NOTE: The following documents must accompany this application as **ANNEXURES**:

	√	Document attached
A		Certified copy of ID/passport.
B		Full curriculum vitae, including a list of publications.
C		Synopsis of PhD work, detailing work already published and PhD work which is in progress for publication
D		<u>A motivation letter, detailing your experience and suitability for the project.</u>
F		Academic record if not an ex-UKZN student.
G		SAQA Certificate if doctorate is not from South Africa
H		Three contactable referees.

2 SUMMARY OF PROPOSED PROJECT INFORMATION

2.1 Research Area:.....

2.2 Short descriptive title of the proposed project(s):.....

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2.3 Should this application be successful, when do you expect to take up the award?.....

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2.4. Have you applied to any other organisation(s) for a grant for this study? (If **YES**, give details)

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2.5 Summary of proposed publication schedule for the 12 months of appointment.

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STATEMENT BY APPLICANT

I certify that the above information is correct, and that I am conversant with the conditions under which the Post Doctoral Scholarship will be awarded.

Signature of Applicant:

Date:

3 ENDORSEMENTS (FOR INTERNAL USE ONLY – applicants are NOT REQUIRED to complete this section)

3.3 ENDORSEMENT BY THE ACADEMIC LEADER FOR HIGHER DEGREES & RESEARCH AND THE DEAN AND HEAD OF SCHOOL		
NAME OF SCHOOL:		
This application is supported	Yes	No
COMMENTS		
..... SIGNATURE OF ACADEMIC LEADER (EXECUTIVELY OR ON BEHALF OF SRHDC) NAME:	 DATE
..... SIGNATURE OF HEAD OF SCHOOL NAME:	 DATE

FOR OFFICE USE ONLY

3.4 ENDORSEMENT BY THE COLLEGE DEAN OF RESEARCH		
This application is supported:	Yes	No
Name of Appointed Supervisor:		
COMMENTS		
..... SIGNATURE OF COLLEGE DEAN OF RESEARCH NAME:	 DATE

3.2 ENDORSEMENT BY THE HOST (for applicants proposing a project)		
NAME:		
The proposed research project is viable	Yes	No
COMMENTS		
..... SIGNATURE OF HOST	 DATE

	APPLICANT:	
	SCHOOL:	
	SUPERVISOR:	
	Date	Signature
1	Application received	
2	Checklist complete	
3	CDR initial assessment	
4	School approval	
5	Final approval	
6	Notification	