

# FACULTY OF MANAGEMENT SCIENCES

Address: A-Block, ML Sultan Campus  
Tel: (031) 373 5441



## APPLICATION IN TERMS OF RULE G10A FOR THE CONFERMENT OF STATUS OF A QUALIFICATION FOR REGISTERING FOR A HIGHER QUALIFICATION

STUDENT DETAILS (to be completed by applicant)				
Student Number				
Surname		First Name/s		
Identity Number				
Passport Number (International Student)				
Postal Address				
		Postal Code		
Contact Number/s	Home	Work	Cell	
Email Address				

Qualification for which Applicant wishes to be registered for: <i>(e.g. BTech: Engineering: Mechanical)</i>				
Pre-Requisite Qualification for which status is applied for: <i>(e.g. NDip: Engineering: Mechanical)</i>				
Proposed year of registration:	Annual	Semester	Part-time	Full-time

1. ACADEMIC QUALIFICATIONS (Certified copies to be attached)	
(i) <b>Completed</b> (if none, please state)	Date
(ii) <b>Incomplete</b> (if none, please state)	
2. PROFESSIONAL QUALIFICATIONS (Certified copies to be attached)	
<b>Declaration by Applicant:</b> I hereby make application in terms of Rule G 10A and certify that the details furnished in this application and the attached documentation are correct.	
Signature of Student:	Date:

Routing: Student → HoD → Exco → Faculty Office

SECTION B: To be completed by Head of Department		
ASSESSMENT PANEL		
Name	Rank	Qualification
<b>The assessment panel recommends that the application be approved</b>		
Unconditionally	or subject to the following conditions	(please ✓ applicable block)
<b>i. Academic Requirements</b>		
<b>ii. Experiential Requirements</b>		
<b>iii. Any other requirements</b>		

SECTION C: RECOMMENDATIONS					
	Name	Signature	Approved (✓)	Not Approved (✗)	Date
<b>Head of Department</b> (on behalf of the assessment panel)					
<b>Executive Dean</b> (on behalf of Exco of Faculty Board)					
<b>Date of Exco Meeting when decision was taken</b>					

FOR OFFICE USE			
Received by		Date	
Processed by		Date	
Checked by		Date	
Faculty Officer		Date	

Routing: Student → HoD → Exco → Faculty Office