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**CSIR-DST Inter-Programme Postgraduate Bursary Support**

**BURSARY APPLICATION FORM**

Please read the eligibility guidelines before proceeding with the application (See CSIR DST Inter-Bursary - Eligibility Guidelines document). Only fully completed application forms will be considered. Please type in the information (no handwritten submissions will be considered).

Honours/4th year Engineering/BTech level applicants should only complete Sections **A, B** and **C**. Masters and PhD level applicants should only complete Sections **A, B, D** and **E**.

All applications must be accompanied by the following documents:

* Proof of South African Identity Document (ID) or Permanent Residency or Passport
* Official and certified university degree certificates and transcripts indicating a minimum accumulative academic achievement in previous degree.
* Recommendation by Supervisor (compulsory for master’s and doctoral applicants).
* Admission letter indicating full time registration (if available). This will be required if successful.
* Reference Letters (if available).

**Please note the following**: All required documents must be attached as one PDF file in the following order: Identity document, proof of permanent residence and university employment letter (if applicable), certified university degree certificates and transcripts, letter of admission (if available).

It is the responsibility of the student to find a suitable supervisor and ensure that the supervisor supports the application.

**Section A: Personal and Contact Information**

**Please complete the following section in full. Incomplete application form will not be considered. Section marked \* is not compulsory.**

|  |  |
| --- | --- |
| **Student Name(s):** |  |
| **Surname:** |  |
| **Title:** |  |
| **Gender:** |  |
| **Race:** |  |
| **Nationality:** |  |
| **Institution:** |  |
| **Department:** |  |
| **Student Number:** |  |
| **Student ID Number (RSA students) /****Student Passport No. (Non-RSA)** |  |
| **Email Address:** |  |
| **Telephone Number:** |  |
| **Indicate type of physical disability (if any)** |  |
| **Supervisors/HoD (for Honours level students) Name:** |  |
| **Supervisors/HoD (for Honours level students) Email Address:** |  |
| **Supervisors /HoD (for Honours level students) Telephone Number:** |  |

**Section B: Bursary Information**

|  |  |
| --- | --- |
| **Bursary applying for:***Delete that which is not applicable* | PhDMScHonours4th Year EngineeringBTech |

**Section C: Course Information**

**NB: This section should be completed by Honours/4th year Engineering or Btech applicants ONLY**

|  |  |
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| **Provide name and brief content of each course to be registered for in 2017** |  |

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| **Signature of applicant:**  |  |
| **Place:** |  |
| **Date:** |  |

**Section D: Research Area Information**

**NB: This section should be completed by Masters and PhD level applicants ONLY.**

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| --- | --- |
| **Year of study being applied for:***Delete that which is not applicable* | 123 |

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| **Priority research area (**See *Eligibility Guidelines* document**):***Delete priority area which is not applicable* | AerospaceCompositesModelling and Digital Sciences: Information SecurityMicrosystems TechnologyTitanium (Manufacturing Elements)PhotonicsBiotechnology* Biopharming
* Bioprocessing
* Biocatalysis

Information and Communications Technology |
| **Technology Stream or research areas of interest (**See *Eligibility Guidelines* document for some examples**)** |  |

**Section E: Project Information**

**Title:**

**Problem Identification:**

*(Brief description of the problem and research question (s) to be addressed):*

**Research Aims and Objectives:**

*(Briefly outline the main aim(s) of the proposed research and specify the research objectives to be achieved)*

**Expected Outputs, Outcomes and Impact:**

*(Outline of the expected direct and indirect outputs/outcomes/impact of the research on the advancement of scientific knowledge)*

**Declaration by Applicant**

I herewith declare that to the best of my knowledge:

* I have permission from my Supervisor to undertake the proposed work within the precincts of said entity and will have access to all required facilities and other forms of support.

I will adhere to the conditions of the grant as described in the letter of award if my application is successful.

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| **Signature of applicant:**  |  |
| **Place:** |  |
| **Date:** |  |

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| --- |
| **Motivation by Supervisor:** |
|  |
| Date |  | Title |  |
| Name(s) and Surname |  |
| Signature |  |

**Please scan as a pdf and submit by return email to:** **HCD-INTERBURSARY@csir.co.za**