*UNIVERSITY OF PRETORIA*

*FACULTY OF EDUCATION*

***APPLICATION FOR ADMISSION TO SELECTION FOR THE MEd-COURSE IN***

***Educational Psychology 2019***

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| *PLEASE SUBMIT YOUR COMPLETE APPLICATION TO THE STUDENT ADMINISTRATION OF THE FACULTY OF EDUCATION, GROENKLOOF CAMPUS* |

**Photo**

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| **1.** | **Personal Information** |

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| 1.2 | Name (First name (s) and surname: Dr/Mr/Mrs/Miss/Ms): |
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| 1.1 | UP Student number: |  |  |  |  |  |  |  |  |

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| 1.3 | ID number: |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| 1.4 | Postal address: | 1.5 | Residential address: |
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| 1.6 | Cell number: |  | | | | 1.7 | | Fax number: | |  | |
| 1.8 | E-mail address: | |  | | | | | | | | |
|  |  | | | | | |  | | | | |
| 1.9 | Proficiency in other South African Languages:   |  |  |  |  | | --- | --- | --- | --- | | Language | Speak | Read | Write | | Afrikaans |  |  |  | | Northern Sotho |  |  |  | | Southern Sotho |  |  |  | | Tswana |  |  |  | | Zulu |  |  |  | | Venda |  |  |  | | Swati |  |  |  | | Xhosa |  |  |  | | Ndebele |  |  |  | | | | | | | | | | | |
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| 1.10 | Race/Ethnic group: | | |  | | | | | | | |
| 1.11 | Telephone numbers: | | | Office |  | | | | Code | |  |
| Home |  | | | | Code | |  |

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| 1.12 | Current occupation: |  |
| 1.13 | Marital status: |  |

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| 1.14 | Were you previously enrolled for any MEd/PhD/DEd degree at UP or at any other university? If yes, please give full details: |  | Yes |  | No |
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| 1.15 | Have you applied to other universities for this degree? If yes, please give full details: | | | Yes |  | No |
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| 1.16 | **Qualifications:** | | | | | | |
| Degree | | Year obtained | University | | | | | |
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| Teacher's Diploma | | Year obtained | | College/University | | |
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| 1.17 | **Teaching experience:** | | | | |
| School/College/University | | | Number of years | | Position held | |
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| 1.18 | Other qualifications or relevant professional training: |
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| 1.19 | **ACADEMIC RECORD:** |
|  | * Please provide a copy of your complete academic record. Attach **certified copies** of all under- and postgraduate qualifications. |

1.20 Please indicate if you have completed undergraduate courses in **Psychology** and/ or **Education.**

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| **Subject** | Year | | Final Mark |
| Psychology 1 | |  |  |
| Psychology 2 | |  |  |
| Psychology 3 | |  |  |
| Hons Psychology | |  |  |
| Education 1 | |  |  |
| Education 2 | |  |  |
| Education 3 | |  |  |
| Hons Education | |  |  |

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| **2.** | **AUTOBIOGRAPHICAL INFORMATION** |
| 2.1 | Motivate your interest in Educational Psychology. Discuss how you see the role of an Educational psychologist in South Africa. |
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| 2.2 | What do you consider to be the essential personality attributes of an Educational Psychologist? |
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| 2.3 | To what extent do you consider yourself to meet the attributes of an Educational Psychologist? Justify your answer. |
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**2.4 References**

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|  | Please submit the names of two professional persons who are not related to you and who are not members of staff of the Department of Educational Psychology, University of Pretoria: | | | | | | |
| 1. | Name: |  | | | | | |
|  | Address: |  | | | | | |
|  |  | | | Code: |  | Tel no.: |  |
|  | Occupation: | |  | | | | |
|  | Email: | |  | | | | |

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| 2. | Name: |  |

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|  | Address: |  | | | | | |
|  |  | | | Code: |  | Tel no.: |  |
|  | Occupation: | |  | | | | |
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1. **GENERAL INFORMATION**

Departmental selection is in three phases and will take place from **20 - 23 August 2018.**

* + Phase 1 entails paper-based selection
  + Phase 2 consists of “objective assessment” (“testing”). Phase 2 will take place on the 20th August. The cost of the objective assessment will amount to about R300-R400. The account details for payment will be conveyed to applicants by 31st July 2018. The venue for Phase 2 assessment is at the department of Educational Psychology in Groenkloof. More information will be communicated to applicants.
  + Phase 3 comprises inviting some candidates for interviews and for completing other activities.

1. Candidates attend the selection at their own cost.
2. All candidates will be informed of the outcome of their application.
3. Where did you hear about this program?

……………………………………………………………………………………………………………………

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| Yes | No |

1. Were you a registered student at the University of Pretoria in 2018?

***If No*,** you have to submit a UP application, ***in addition*** to this application for selection.

Date of online application: …………………………………………………………………....

1. ***We have attached a consent form to ask for your permission to use your application data for research. If you are willing to participate in the research, please sign the consent form and submit it with this application***.

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| **9** | **DECLARATION** |

I herewith declare that all the information given is true and correct. I have attached my full academic record and certified copies of qualifications (section 1.20).

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| Yes | No |

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| **SIGNATURE** |  | **DATE** |

**CLOSING DATE AT FACULTY OF EDUCATION, GROENKLOOF CAMPUS: 31 July 2018**

**NO LATE APPLICATIONS CAN AND WILL BE CONSIDERED**

The Head: Student Administration

Faculty of Education

University of Pretoria

**Groenkloof Campus**

P/bag X20

Hatfield

0028

**Thank you for considering your postgraduate studies at the University of Pretoria!**

**MEd Educational Psychology Programme**

**Selections 2019**

**Consent Form**

***Request for permission to use this application data for research in the department of Educational Psychology. The data will be used to improve on the application processes and procedures used in the department for application and admission into this masters educational psychology program. If you are willing to help us improve our application and admission into the program process you can participate in this research. Should you be interested in participating, please sign the consent form and submit it with this application*.**

**Declaration of consent**

If you are willing to participate in this study, please sign this letter as a declaration of your consent. Signing this letter indicates that you understand that your participation is voluntary. Under no circumstances will your identity be disclosed or published to any party/organisation that may be involved in the research process.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (your name), student number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to take part in this research. I understand that the researcher subscribes to the following principals:

* **Voluntary participation** - participants may withdraw from the research at any time during the study.
* **Informed consent** - research participants will at all times be fully informed about the research process and purposes, and must give consent to their participation in this research.
* **Safety in participation**- Participants will not be placed at risk or harm of any kind.
* **Privacy**- meaning that the confidentiality and anonymity of human respondents will be protected at all times.
* **Trust -** Participants will not be subjected to any acts of deception or betrayal in the research process or its published outcomes.

Student’s name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Student’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_