



**VAAL UNIVERSITY
OF TECHNOLOGY**

Inspiring thought. Shaping talent.

Research Directorate

Vanderbijlpark Campus

Andries Potgieter Blvd

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Private Bag X021

📍 Vanderbijlpark, 1911, South Africa
www.vut.ac.za

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NEW APPLICATION

MASTER'S DEGREE ADMISSION 2025

APPLICATION CLOSING DATE 31 JANUARY 2025

1. STUDENT AND QUALIFICATION INFORMATION

Have you been registered as a student at the Vaal University of Technology before?

Yes

No

If yes, please indicate your student number.

Would you like to register as a full-time student?

Or part-time student?

TITLE

: PROF

DR

REV

MR

MRS

MS

SURNAME

:

FIRST NAME

:

MIDDLE NAME(S)

:

DATE OF BIRTH

:

SA ID NUMBER

:

PASSPORT NUMBER

:

HOME LANGUAGE (specify)

:

**Disclosure of information is subject to the Promotion of Access to Information Act and other related laws*

RACE*

:

African

Coloured

Indian

White

Other

GENDER*

:

Male

Female

Other

PROPOSED MASTER DEGREE

:

FACULTY

:

DISCIPLINE

:

YEAR OF ENTRY

:

Compulsory: Write a brief description (not more than one page) of your ideas about the proposed project/study/experiment / scientific investigation to obtain approval from the faculty to conduct the study and / or to appoint a Supervisor / Mentor to assist you with your studies. **Alternatively - attach a draft research proposal.**

2. ADDRESS AND CONTACT DETAILS

PHYSICAL ADDRESS:

POSTAL ADDRESS:

Postal Code _____

Postal Code _____

CONTACT DETAILS:

WORK : _____

HOME : _____

CELL : _____

E-MAIL : _____

Please ensure we have your correct cell number and email address to enable VUT to invite you to relevant post-graduate activities.

IF YOU ARE EMPLOYED, PLEASE COMPLETE THE FOLLOWING:

Company or Institution Name : _____

Company or Institution Address : _____

Postal Code : _____ Number of Years Employed : _____

Work Telephone Number : _____ Area Dialling Code : _____

3. NEXT OF KIN INFORMATION

Name and Surname of Next-of-Kin _____

PHYSICAL ADDRESS:

POSTAL ADDRESS:

Postal Code _____

Postal Code _____

CONTACT DETAILS:

WORK : _____

HOME : _____

CELL : _____

E-MAIL : _____

4. RESIDENCY

Are you a permanent resident of South Africa?

Yes

No

If not, what is your country of permanent residence? _____

Passport Number: _____

Expiry Date: Day _____ Month _____ Year _____

5. ENGLISH PROFICIENCY (APPLICABLE TO INTERNATIONAL STUDENTS ONLY)

Students applying for admission into a degree programme at the University must demonstrate that they have obtained one of the following levels of English proficiency.

1. A pass in an examination equivalent to English at the Higher Grade (First or Second Language) at the South African Senior Certificate level (matriculation).
2. A pass in the English language at A-level, O-level (C-symbol or higher), or the International Baccalaureate or equivalent examination.

3. For international applicants who do not satisfy (1) or (2) above and for whom English is a foreign language:

- An overall band score of 7.0 on the International English Language Testing System (IELTS) for
- Post-Graduate studies and 6.0 for Undergraduate studies, or
- A test score 550 on the Test of English as a Foreign Language (TOEFL).

Scores must be submitted with application forms.

Name of your English Proficient Document: _____

6. HIGH SCHOOL DETAILS

Type of Matriculation Exemption already held: (please tick one)

- | | | | |
|-------------------------|--------------------------|---|--------------------------|
| 02 Full Exemption | <input type="checkbox"/> | 06 Other Senior Certificate | <input type="checkbox"/> |
| 02 Ordinary | <input type="checkbox"/> | 07 NTC3 / N3 / NSC | <input type="checkbox"/> |
| 03 Mature Age Exemption | <input type="checkbox"/> | 08 Standard 10 Practical | <input type="checkbox"/> |
| 04 Foreign Exemption | <input type="checkbox"/> | 09 Other | <input type="checkbox"/> |
| 05 Immigrants Exemption | <input type="checkbox"/> | 10 Discretionary Provision (Senate Exemption) | <input type="checkbox"/> |

Note: ITS has set up the code structure regarding Government reporting requirements.

SCHOOL NAME(S)	:	_____	_____
YEAR	:	From: _____ To: _____	From: _____ To: _____
EXAMINATION AUTHORITY (e.g., Gauteng, etc.)	:	_____	_____

GRADE PASSED : _____

7. POST SCHOOL ENROLMENT

NAME OF INSTITUTION 1 : _____
DEGREE / DIPLOMA / CERTIFICATE : _____
(Attach relevant documentation)
COMPLETED : Yes No
YEAR ATTENDED : From: _____ To: _____

NAME OF INSTITUTION 2 : _____
DEGREE / DIPLOMA / CERTIFICATE : _____
(Attach relevant documentation)
COMPLETED : Yes No
YEAR ATTENDED : From: _____ To: _____

NAME OF INSTITUTION 3 : _____
DEGREE / DIPLOMA / CERTIFICATE : _____
(Attach relevant documentation)
COMPLETED : Yes No
YEAR ATTENDED : From: _____ To: _____

CURRENT ACTIVITY : _____

8. MEDICAL INFORMATION (DISABILITY INFORMATION)

The University is sensitive to the needs of students with a disability and will attempt to provide support where possible. Do you have any disability, physical or otherwise, that might require special support?

Yes: No: If 'yes', please indicate. _____

PERSONS WITH A VISUAL IMPAIRMENT	PERSONS WITH A HEARING IMPAIRMENT	PERSONS WITH PHYSICAL IMPAIRMENT	OTHER IMPAIRMENT
<input type="checkbox"/> Blind	<input type="checkbox"/> Deaf	<input type="checkbox"/> Uses a wheelchair	<input type="checkbox"/> Persons with diabetes

<input type="checkbox"/>	Partially sighted	<input type="checkbox"/>	Partially deaf	<input type="checkbox"/>	Uses crutches / callipers	<input type="checkbox"/>	Persons with epilepsy
		<input type="checkbox"/>	Mildly to moderately deaf	<input type="checkbox"/>	Persons with paraplegia / quadriplegia / hemiplegia / post-polio paralysis	<input type="checkbox"/>	Persons with cerebral palsy
				<input type="checkbox"/>	Other (Specify)	<input type="checkbox"/>	Persons with intellectual / psychiatric / psychological impairment
						<input type="checkbox"/>	Persons with medical / chronic ailments that require support.
						<input type="checkbox"/>	Other (Specify)

9. COMPULSORY HEALTH INSURANCE (INTERNATIONAL STUDENTS ONLY)

I _____ confirm that I will / have applied for adequate health insurance cover while in South Africa.

Name of Insurance Company: _____

Telephone Number: _____

10. FUNDING STUDIES

How do you plan to finance your studies? _____

Note: A registered student is responsible for payment of all fees, even if funded by a sponsor. However, you will be eligible for a Vaal University of Technology Grant if the Higher Degrees Committee approves your proposal within 12 months of the initial registration.

11. CHECKLIST

PLEASE ENSURE THAT THE FOLLOWING RELEVANT DOCUMENTS ARE ENCLOSED WITH THIS APPLICATION

Please ensure the **certified documents** are enclosed with this application; **otherwise, we will not register you.**

	Yes	No
Have you completed the application form?	<input type="checkbox"/>	<input type="checkbox"/>
Have you indicated your choice of degree and campus?	<input type="checkbox"/>	<input type="checkbox"/>
Have you enclosed all the required documentation?		
- Certified copy of the ID document?	<input type="checkbox"/>	<input type="checkbox"/>
- Certified copy of the senior certificate?	<input type="checkbox"/>	<input type="checkbox"/>
- Certified copy of previous qualifications?	<input type="checkbox"/>	<input type="checkbox"/>
- Certified copy of degree certificates? Advanced Diploma / Postgraduate Diploma / Honors qualification?	<input type="checkbox"/>	<input type="checkbox"/>
- Proof of residence, e.g., "Water and electricity account", "Any other account reflecting your address"?	<input type="checkbox"/>	<input type="checkbox"/>
Also, to be completed by International Students (not applicable to RSA citizens)		
- Certified copy of Passport?	<input type="checkbox"/>	<input type="checkbox"/>
- Certified copy of degree certificate and SAQA evaluation of your degree results?	<input type="checkbox"/>	<input type="checkbox"/>

Centre for the Evaluation of Education Qualifications

POSTNET Suite 248

<http://www.saqa.org.za>

Private Bag X06

Tel: 086 010 3188 / 012 431-5000

Waterkloof, 0145

The registration fee of R2 500.00 is payable as soon as we notify you that your application was successful.

Registration Fee deposits can be made to any ABSA Branch:

Account Number : 0530 861 945

Branch Code : 632005

The name and student number must be indicated as the "reference" on the slip. A copy of the deposit slip should be forwarded to the fax number (016) 950 9779 or email nomathembak@vut.ac.za.

12. DECLARATION OF UNDERSTANDING

1. I, _____, the student undertakes
 1.1 _____ To comply with the procedures, rules, and regulations of the Vaal University of Technology.

- 1.2 To inform the Higher Degrees Unit in writing immediately if I change my address or intend to cancel my provisional acceptance.
 - 1.3 To acquaint myself with all the rules and general regulations related to the degree I am applying for.
 - 1.4 To make alternate arrangements for accommodation should the University accept me for the degree and cannot offer me accommodation.
2. I now accept liability for paying all tuition fees or other fees which the University may charge because of my studies at the University.
- 2.1 I also recognise that class, residence, and other fees are revised annually by the University and increased accordingly.
 - 2.2 I agree that if the University instructs Attorneys to take any steps against me to recover any amounts due to the University by myself, I shall pay all costs between Attorney and client, including collection commission.
3. I am aware that my enrolment is valid only if it complies with the degree's regulations, notwithstanding the University's acceptance of this application.
4. I/We accept the responsibility of submitting all documents required by the University before the stipulated due dates.
5. I declare that:
- 5.1 I make this application and give the declarations and understandings with the knowledge and consent of my parent/guardian/employer (if necessary).
 - 5.2 I warrant that the information contained herein is true and correct. The University shall be entitled to declare the contract void and cancel my registration if I have made any misrepresentation or omission on this application.
 - 5.3 International Students:
 - 5.3.1 *I know I am responsible for renewing my study visa three months before the expiry date.*
 - 5.3.2 *Refugees: I know I am responsible for renewing my study visa one month before its expiry date.*
 - 5.3.3 *I know I am responsible for obtaining and paying for my SAQA evaluation.*
 - 5.4 I / We now absolve the Vaal University of Technology, its staff, employees, representatives and / or agents from any claims which I/the student may acquire as a result of any injuries which I may receive and/or damages which I/the student may suffer as a result of any happening, incident, accident, injury, illness or death; however, it may have resulted or as a result of my participation in any sport/excursion/ visit or transport which may take place during my/his/her studies at the University.

Signature of Student _____

Date _____

PLEASE FORWARD YOUR APPLICATION WITH CERTIFIED ATTACHMENTS TO THE FOLLOWING:

THE HIGHER DEGREE OFFICE D016 OR DO13-1

Fax : (016) 950 9779 Private Bag X021
Tel : (016) 950 9822 or 7639 Vanderbijlpark
e-mail : post.graduate@vut.ac.za 1900

13. ADMISSION REQUIREMENTS

ENGINEERING AND TECHNOLOGY	APPLIED AND COMPUTER SCIENCES	MANAGEMENT SCIENCES	HUMAN SCIENCES
A relevant Postgraduate Diploma/Honours or equivalent. A Research Methodology course must be completed. An average pass percentage of 65% is required.	A relevant Postgraduate Diploma/Honours registered by SAQA. An average pass of 60% is required. An approved Research Methodology course must be completed.	An average of 60% for a relevant completed Post Graduate Diploma or equivalent Degree qualification in a related discipline. An average of 60% pass average in a Research Methodology subject with a Research Project component at NQF Level 8 is also required. Successful achievement of the faculty selection criteria, as deemed necessary.	A relevant Postgraduate Diploma/Honours or an equivalent qualification as approved by SAQA with an average pass percentage of 65% and 60% for research methodology on NQF level 8. In addition, students may be required to present a PowerPoint presentation of ten minutes defending their desire to study towards a postgraduate qualification. International students will be required to complete an English proficiency test.

ANNEXURE A: TO BE COMPLETED BY THE HEAD OF DEPARTMENT AND PROMOTERS

FACULTY ACCEPTANCE OF ADMISSION

We only accept applications if this form has been completed fully. This information is required for registration and reporting.

Student Name : _____
Student Number : _____
Faculty : _____
Department : _____
Department Head : _____
Course Code : _____
Subject Code(s) :

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For new subject codes / course codes, please see Annexure C on Page 14

Name of Supervisor : _____ Department : _____
Tel No. of Supervisor : _____ e-mail Address : _____
Signature of Supervisor : _____ Date : _____

If applicable:

Name of Co-Supervisor : _____ Department : _____
Tel No. of Co-Supervisor : _____ e-mail Address : _____
Signature of Co-Supervisor : _____ Date : _____

NB Compulsory:

Accepted : Reason for Acceptance
Date : _____

Signature HoD : _____

Acceptance Approved by Executive Dean- _____ Date : _____ Signature : _____

APPROVAL BY THE HEAD OF DEPARTMENT

ADMISSIONS UNDER SPECIAL CONDITIONS:

NOTE: *Where a candidate holds an appropriate equivalent degree from another University Faculty, admission under special conditions will be a technicality, and a statement to this effect is required here. A **detailed motivation** MUST accompany this form for all special condition cases that are not routine 'technical'. Please attach a full CV in the area of specialisation and supporting documentation.*

I, _____, the Head of Department has confirmed:

1. Candidate completed – Research Methodology
2. The viability, nature and extent of the project
3. The suitability of the candidate
4. The availability and suitability of supervision
5. The nature and extent of the necessary resources, and I recommend that the candidate be accepted for the degree.
6. This degree follows the same discipline as the Postgraduate Diploma completed; the **student cannot jump to another discipline.**

I have considered the six points above and accepted the student for the degree.

Print Name

Signature

Date

ANNEXURE B: TO BE COMPLETED BY THE HEAD OF DEPARTMENT AND EXECUTIVE DEAN

FACULTY REJECTION OF SUBMISSION

We only accept applications if this form has been completed fully. This information is required for registration and reporting.

Student Name : _____
Student Number : _____
Faculty : _____
Department : _____
Department Head : _____
Course Code : _____
Subject Code(s) :

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NB Compulsory:

Rejected : Reason for Acceptance

Date : _____

Signature : _____
HoD : _____

Rejection Approved by Executive Dean: _____ Date : _____ Signature : _____

ONLY INTERNATIONAL STUDENTS

INTERNATIONALISATION DEPARTMENT ACCEPTANCE OF ADMISSION	
<p>STEPS TO FOLLOW BY INTERNATIONAL APPLICANTS:</p> <p>1. Attach all certificates and documents to your application form. Photocopies must be certified as being a true copy of the original. Originals must be produced before actual registration.</p>	<p>IMPORTANT NOTES:</p> <p>1. A study visa is only valid for the field of study and educational institution for which the original approval was granted.</p>
<p>2. A fully completed application form must be submitted to the Internationalisation Department.</p>	<p>2. Students who change their field of study must obtain a new visa from the Department of Home Affairs.</p>
<p>3. Your application will then undergo a selection process at VUT. If your application is successful, you will receive an acceptance letter offering you a place to study at VUT on condition that you receive a study visa, meet VUT departmental entry requirements and pay all necessary fees.</p>	<p>3. Acceptance of a student's admission to VUT does not bind the Department of Home Affairs in any way to allow the person into the country, nor does it remove the need to obtain official permission from the Department. Therefore, it is important that a prospective student awaits the outcome to an application for a study visa before proceeding to the Republic of South Africa.</p>
<p>4. After receiving an acceptance letter you may proceed to obtain your study visa at the Embassy, Consulate or Trade Mission of your country of origin, or at the South African High Commission.</p>	<p>4. A study visa does not qualify an international student to become a South African citizen. Students wishing to become South African citizens after finishing their studies are required to return to their home countries from where they can apply through a South African representative.</p>
<p>5. There are no provisional registrations permitted for international students. Even if you have been accepted for study, VUT cannot be held responsible should you fail to comply with these requirements for actual registration</p>	<p>5. You may not enter South Africa on a visitor's visa and then apply for a study visa.</p>

Please only proceed to the Vaal University of Technology with the proper permit. You must produce proof of medical aid membership at registration, or you will not be allowed to register.

Signature of Student _____ Date _____

We at the International Relations Department confirm that all the documentation has been received and all the requirements have been met.

Name of Admissions Officer _____ Department _____ Tel. Number _____
 e-mail _____ Signature _____ Date _____
 Head of Department _____ Signature _____ Date _____

ANNEXURE C: NEW SUBJECTS AND COURSE CODES

FACULTY DESCRIPTION	QUAL CODE	QUAL DESCRIPTION	SUBJECT CODE
Faculty of Engineering and Technology	MP0800	Master of Engineering in Chemical Engineering	EHDPH6A
Faculty of Engineering and Technology	MP0810	Master of Engineering in Civil Engineering	ECCIV6A
Faculty of Engineering and Technology	MP0820	Master of Engineering in Electrical Engineering	EPRHP6A
Faculty of Engineering and Technology	MP0823	Master of Engineering in Energy Efficiency	EEACC6A
Faculty of Engineering and Technology	MP0830	Master of Engineering in Industrial Engineering	EBRHP6A
Faculty of Engineering and Technology	MP0840	Master of Engineering in Mechanical Engineering	EMRHP6A
Faculty of Engineering and Technology	MP0850	Master of Engineering in Metallurgical Engineering	EYRHP6A
Faculty of Management Sciences	MD0432	Master of Management in Management Accounting	BAMMA6A
Faculty of Management Sciences	Md0450	Master of Management in Human Resources Management	BHHRM6A
Faculty of Management Sciences	MD0452	Master of Management in Labour Relations Management	BHLRM6A
Faculty of Management Sciences	MD0472	Master of Management in Supply Chain Management	BBSCM6A
Faculty of Management Sciences	MD0480	Master of Management in Marketing	BMMAR6A
Faculty of Management Sciences	MD0495	Master of Management in Business Administration	BHMBA6A
Faculty of Applied & Computer Sciences	MD0602	Master of Communication and Information Technology	AIPIC6A
Faculty of Applied & Computer Sciences	MD1502	Master of Applied Sciences in Chemistry	AACHM6A
Faculty of Applied & Computer Sciences	MD1510	Master of Applied Sciences in Biotechnology	ABDPH6A
Faculty of Human Sciences	MD0300	Master of Visual Arts in Fine Art	HVVAA6A
Faculty of Human Sciences	MD0301	Master of Visual Arts in Multimedia	HVVAM6A
Faculty of Human Sciences	MD0302	Master of Visual Arts in Photography	HVVAP6A
Faculty of Human Sciences	MD0310	Master of Visual Arts in Graphic Design	HVVG6A
Faculty of Human Sciences	MD0500	Master of Management in Public Relations Management	HTPRM6A
Faculty of Human Sciences	MD1000	Master of Visual Arts in Fashion	HVVAF6A
Faculty of Human Sciences	MD1010	Master of Management in Food Service Management	HTFSM6A
Faculty of Human Sciences	MD1011	Master of Management in Food & Beverage Management	HTFBM6A
Faculty of Human Sciences	MD2200	Master of Management in Travel & Tourism Management Services	HTTTS6A
Faculty of Human Sciences	MD700	Master of Education	HEHRP6A

FOR OFFICE USE ONLY: HIGHER DEGREE UNIT

Student Number:	_____	Name:	_____
Application Fee Paid:	R _____		_____
Receipt Number:	_____	Date:	_____
Entered on ITS By:	_____	Date:	_____
Selection Decision:	_____	Date:	_____



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