Application No.	Serial Number: [



CHINHOYI UNIVERSITY OF TECHNOLOGY APPLICATION FOR POSTGRADUATE ADMISSION

	Certificate Received/Verified Yes (y) / No (N)
Date of receipt	Birth Certificate
Receipt	MøLevel
Amount	Marriage
Date received	University
	OøLevel
	Other
Гуре of Entry	AøLevel
Normal	I.D
Special	
Mature	
Repeat	
	Date acknowledged

1.	PERS	ONAL DETAILS
	2.1	Surname: í í í í í í í í í í í í í í í í í í í
	2.2	First Names: í í í í í í í í í í í í í í í í í í í
	2.3	Title (e.g. Dr./ Mr. / Ms./Miss): í í í í í í í í í í í í í í í í í í í
	2.4	$Previous\ Name\ (If\ applicable): \texttt{i}\ $
	2.5	$Date\ of\ Birth:\ dd. \'i\ \'i\ \'i\ \'i\ \'i\ \'i\ \'i\ \'i\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acute$
	2.6	Place of Birth: \acute{i}
	2.8	$Marital\ Status:\ Single(s)/\ Married\ (M)/\ Divorced\ (D)/\ Widowed\ (w)\ \emph{i}\ \emph$
	2.9	I.D Number: í í í í í í í í í í í í í í í í í í í
	2.10	$Race: Black \ (B)/ \ White \ (W)/ \ Asian \ (A)/ \ Other \ (O) \'i \ \ \acutei \ \ $
		if other; specify: i i
	2.11	Nationality: i i
	2.12	Province í í í í í í í í í í í í í í í í í í í
	2.13	Are you a permanent resident of Zimbabwe: Yes (y)/ No (N): i
		(if No, what permit do you hold, (attach certified copy): í í í í í í í í í í í í í í í í í í í
	2.14	$Period/\ Year\ of\ residence\ in\ Zimbabwe\'i\ \'i\ \'i\ \'i\ \'i\ \'i\ \'i\ \'i\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acutei\ \acute$
	2.15	Religion: í í í í í í í í í í í í í í í í í í í

	2.16	CONTACT DETAILS OF THE NEXT OF KIN					
	2.16.1	Name of Next of Kiní í í í í í í í	í í í í í í í Telephone numberí í	íííííííííííííí			
	2.16.2	The next of kin in 2.16.1 is myí í í í	111111111111111111	ííííííííííííí			
	2.16.3	Contact Address of Next Kiní í í í í		1 1 1 1 1 1 1 1 1 1 1 1			
		111111111111111					
	2.16.4	Next of Kinøs Email addressí í í í í	í í í í í Next of Kin Cell Phone Num	nberí í í í í í í í í			
		7 Disabilities or					
		Special Needs					
		isabilities or Special Needs					
		have a disability, special needs or a nedicate the disability category in the b	medical condition which affect your studie ox (see notes 8a)	s please give details below,			
			ox (see fictes sa)				
	Disab		Details Õõõõõõõõõõõõõõõõõõõõõõõõõõõ	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~			
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	õõõ	õ					
	b) C	riminal Convictions					
	D	o you have any criminal convictions?	Yes No				
3.	CONT	TACT DETAILS					
	3.1						
	3.2	Home Telephone: Code: í í í í í í	í í í í í Telephone number: í í í í	11111111111			
	3.3	Other Contact Tel.: Code í í í í í í	í í í í í Telephone number: í í í í				
	3.4	Cellphone Number: í í í í í í í í		íííííííííííííííííííííííííííííííííííííí			
	3.5	E-mail Address: í í í í í í í í í í í í í í í í í í					
	4.	POST GRADUATE PROGRA	MME				
	4.1	First Choiceí í í í í í í í í í í	111111111111111111				
	4.2	Second Choiceí í í í í í í í í í					
5.	Your	Education (secondary and post-second	lary) including professional qualifications and	training courses			
	Date (from	motitation (morace	Subject(s)	Results (eg BA Hons 2.1)			
	Month	Year location)	Cusject(5)	rtodato (og b/t ilono 2.1)			
1 _		<u> </u>					

ates (from	. to)	Brief detai	ls (e.g. j	job title, compa	any name, ma	in respo	nsibili	ties)			
Ionth/year	Month/year										
Names a	nd Addresse Name :	s of TWO Re	eferees	(You must sen			ence f ame		to the	referee	es listed b
(1)					(ii)						
(1)	Address:				(11)		ddress	:			
(1)					(11)			:			
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 Finance	Address: Tel : Fax :	pay your tuitio	on fees?		(11)	A Te Fa	el ax	: :			
 Finance	Address: Tel : Fax : E-mail :	ouncil	on fees?	Sponsored by		A Te Fa	el ax	: :			

9. Declaration

I confirm that the information on this form is complete and accurate and that no information requested has been omitted. I give my consent to the processing of my data by Chinhoyi University of Technology. I have read the Notes for Guidance and I undertake to be bound by the conditions set out therein.

10. Personal Statement

This is an important section and the Admissions staff will pay particular attention to what you write here. You should explain why you are applying for this postgraduate programme, what you expect to achieve from it, and how it relates to your academic and career development.

Postgraduate Reference Form



Application No:

Please return to:Chinhoyi University of Technology P Bag 7724 Chinhoyi

Section 1. To be completed by the	ne Applicant						
Full name of applicant							
Postgraduate Taught Courses:	☐ Masteros Degree		Postgraduate Diploma	☐ Postgraduate Certificate			
Title of Course:							
Mode of study: available)	☐ Full-time		Part-time	☐ Distance/Open Learning (where			
Section 2: To be completed by the	ne Referee						
Notes to Referee: Your honest a	and forthright assessment ate programmes at Chinh mber that, the applicant c	noyi Uı	niversity of Technology.	. When writing personal comments			
	ete, please return it to the	addre	ess stated at the top of	ur assistance. Please print or type this form. If you have any questions, 03-5 Ext 168			
How long and under what circum	istances have you known	the a	pplicant?				
What do you consider to be the applicantsqstrengths?							
What do you consider to be the a	applicantsqweaknesses?						

Using the chart below, please rate the applicant relative to other students or employees whom you have known in a similar capacity. Please indicate the group with whom you are comparing the applicant(e.g. Student co-workers, e.t.c): $\tilde{0}$ $\tilde{0}$

	Outstanding (Top 5%)	Excellent (6-20%)	Good (21-30%)	Average (31-40%)	Below Average	Unable to Rank
Academic potential	(100 370)	(0 2070)	(21 3070)	(31 4070)	Average	tortant
Ability to work with others						
Ability to work independently						
Initiative						
Maturity						
Motivation						
Written communication skills						
Oral communication skills						
Commitment						
Creativity						
Analytical skills						

Please comment on your rankings indicated above, making any additional statements concerning the applicants academic development to date and present performance; expected examination results/qualifications (if appropriate); interpersonal skills; and if the applicant is from overseas, indicate your understanding of their ability to study at postgraduate level in English.

Please continue on a separate sheet, if necessary

Referees Name:	Referees Signature:
Position/Title:	Date:
Organisation:	
Address:	
City/Town:	Country:
Postal Code:	E-mail:
Telephone No:	Fax No: