

COUNCIL FOR WORLD MISSION
SPECIAL ACADEMIC
ACCOMPANIMENT PROGRAMME



APPLICATION FORM
UNIVERSITY OF KWAZULU-NATAL

General Instructions:

- Please type in your answers, or use CAPITAL letters if you are writing by hand.
- All Special Academic Accompaniment Programme (SAAP) applications must be made through the Office of the church's General Secretary. Please ensure that Section B- Church Endorsement is duly completed **by the General Secretary or Moderator on the applicant's behalf.**
- **IMPORTANT:** **Applicant must pass the institution's English Proficiency Requirement.** Additional requirements as stated in Part D- Checklist Form must be submitted along with the application form. Only complete applications forms will be processed.

PART A

Section 1 - Personal Details					
Last Name		First Name			
Full Name as Stated on the Passport					
Date of Birth (dd/mm/yyyy)	___/___/___	Age		Gender	
Passport Number		Passport Issue Date		Passport Expiry Date	
Nationality				Proficient in English?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Language	Mother Tongue		Other Language/s		
Full address					
Mailing address Street address					
Daytime Phone No.					
Mobile Phone No.					
E-mail address					

Section 2 - Ministry	
Denominational Church	
Sending Church	

Section 3 - Educational Background	
Are you currently studying?	<input type="checkbox"/> Yes, I am studying: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Distance Learning Year : _____ Number of Remaining Semesters: _____ Course: _____ School: _____ Address: _____
	<input type="checkbox"/> No, I am not studying

Describe area of expertise and/or academic specialization

English Language Proficiency

All students applying for admission into a degree programme at the University need to 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 and Second Language) at the South African Senior Certificate level (matriculation).
2. A pass in English language at A-level, or 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 Systems (IELTS) for Post-Graduate studies
 - a test score of 550 on the test of English as a Foreign Language (TOEFL)

Qualifications

Please list your previous completed education, starting with your highest qualification

Qualification	Name of Institution	Country	Start Date	Completion Date

Previous Scholarships

Please list previous scholarship grants received, starting from the most recent

Qualification	Name of Institution	Country	Start Date	Completion Date	Scholarship

Certifications and Licensure/ Other Qualifications

Please list your professional certification and licensure (i.e. Licensed Physician, Registered Social Worker, etc.)

Qualification	Name of Institution	Country	Date

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Publications

Please include relevant academic, professional articles, chapters or books that you have co-authored or authored.

Title of Publication/ Article/Journal	Publisher	Place of Publication	Date and Year of Publication

Section 4 - Work Experience

Period of Employment	Employer	Description of Duties

Will you be returning to this position after scholarship studies? Yes No

If No, what type of employment do you hope to gain upon returning home? _____

Section 5 - Proposed Course of Study/ Programme Details

Degree Programme you are applying for	<input type="checkbox"/> Masters degree <input type="checkbox"/> Doctorate degree
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Pietermaritzburg Campus			
African Theology (Theology)		History of Christianity (Theology)	
Biblical Studies (Theology)		Ministerial Studies (Theology)	
Catholic Theology (Theology)		Systematic Theology (Theology)	
Christian Spirituality (Theology)		History of Christianity (Theology)	
Theology & Development <i>(If so, please see T&D assignment attached)</i>		Gender and Religion (Theology)	
Religion & Governance (Theology)		Sociology of Religion (Theology)	
Religion & Social Transformation		Philosophy	
Classics		Ethics Studies	

Month/Year of Expected Enrolment	
Discipline in which you did your Masters degree for Doctorate Degree	
Doctorate Thesis Proposal Topic	

Section 6 – Initial Research Project Proposal

All doctoral and master candidates, must complete this template and submit it together with the application form before they register for their degree.

Name of Student:

Student No:

(where applicable)

Degree:

Programme:

RESEARCH TOPIC/TITLE (OR CHOSEN AREA OF RESEARCH, IF NO TITLE YET):

BRIEF DESCRIPTION OF PROPOSED PROJECT, INCLUDING KEY QUESTIONS TO BE ADDRESSED as guided below *(approximately 500 words)*

AIMS AND OBJECTIVES *(What do you want to achieve?)*

RESEARCH QUESTIONS *(Provide evidence that work will be performed at the appropriate academic level):*

PRELIMINARY LITERATURE REVIEW

IMPORTANCE OF TOPIC *(Locate topic in current literature):*

For PhD only: provide evidence of originality of your propose study in relation to research area

METHODOLOGICAL APPROACH *(Philosophical, theoretical, empirical, etc)*

SIGNATURE: _____

DATE: _____

GUIDELINES FOR RESEARCH PROPOSAL:

- i. Brief descriptive title (which can be changed later)
- ii. Outline of what you will research.
- iii. Reason for choosing this topic. Why is it important to society? To your discipline? To you? What might its implications/value be?
- iv. Any known precedents or parallel work in this topic? In what ways will your study not merely duplicate this?
- v. Hypothesis or theoretical framework guiding the research?
- vi. Have you any previous experience in doing similar research?
- vii. Research methodology: What research methods will you use? Eg Experimental designs and analysis, surveys, literature study, historical analysis?
- viii. Give bibliographical details of primary sources you will consult and secondary sources which you propose to consult.
- ix. Proposed work schedule and envisaged target dates.

What academic and work experience would help you gain access to this program? *Please attach a motivational letter of not more than 1000 words in this form in support of your application.*

Please explain why you chose this institution for your course.

Continue on a separate sheet, if necessary.

On a separate sheet, please write an essay on your understanding on the topic: **Mission in the Context of Empire**. This should not exceed more than 2,000 words. Please send your essay as an attachment to your completed application form.

For background information, you may read on the **CWM Theology Statement 2010** and request for copy at (e-mail:) empowerment@cwmission.org.

You may write your essay in the language of your choice. If your essay is not in English, you must:

- Obtain an English translation of your essay to be sent along with the original text.
- Ensure that the copy has been certified by your General Secretary or Church Moderator as a true translation of your original work.
- Provide name, email address and telephone number of the person certifier.

Section 7 – Reintegration and Action Plan

This part aims to assess how you plan on using the knowledge, skills and experiences to be gained from the CWM SAAP and how this is aligned to your church’s over-all mission, goals and objectives. You are strongly advised to consult with your General Secretary/Church Moderator in completing this part.

Over-all Objective				
Specific Objectives	Tasks	Success Criteria/ Indicators	Time Frame	Resources Needed

Continue on a separate sheet, if necessary.

Describe the relevance of your study in the church's mission? Why you want to study this particular course?

Continue on a separate sheet, if necessary

How is your course relevant to the priority areas of your church?

Continue on a separate sheet, if necessary

Section 8 - Declaration

I certify that all the information I have provided are true and complete to the best of my knowledge and belief.

Signed: **Date**.....

CWM will hold your details on file in order to process your application. We may wish in the future to send you further information about CWM or seek your views about its work. However, if you do not want us to contact you again, please tick this box .

PART B

CHURCH ENDORSEMENT

(To be completed by General Secretary/Church Moderator)

The Special Academic Accompaniment Programme is designed to support the capacity development in the church by equipping the body of Christ to carry out God's mission. The Church must make this application in accordance to the church's mission priorities and capacity development plan. The individual on whose behalf the church is making this application must be identified in direct response to the capacity needs of the church, with a commitment to return and serve in the church.

How does this application fit your church's mission priorities and long-term capacity development plan?

Continue on a separate sheet, if necessary

Is the applicant's Reintegration and Action Plan (see Section 7) consistent with the Church's plans? If yes, how will the candidate be used in the Church upon completion of the scholarship? If not, how will the applicant serve the Church upon return?

Continue on a separate sheet, if necessary

How is s/he has chosen? Please discuss briefly the selection process undertaken.

Continue on a separate sheet, if necessary

How will the church support the candidate and/or the candidate's family during the study period?

Continue on a separate sheet if necessary

Other Remarks/ Additional Information

Signature of General Secretary/Church Moderator

Name	
Designation	
Full Address	
Telephone No.	
E-mail address	
Date	

PART C

MEDICAL EXAMINATION

Name							
Date of Birth				Age		Gender	
Pulse rate		Blood pressure		Height		Weight	

Emergency Contact Numbers. *Please provide two (2) emergency contacts.*

Full Name							
Relationship							
Daytime phone number				Mobile number			
Postal address							
Email							
Full Name							
Relationship							
Daytime phone number				Mobile number			
Postal address							
Email							
Do you need any mobility assistance? <i>If yes, please give details.</i>							
Do you have any disabilities CWM should be aware of? <i>If yes, please give details.</i>							
Do you have known allergies? <i>If yes, please give details.</i>							
Are you aware of any medical conditions that may hinder your participation to the Scholarship Programme? <i>If yes, please give details.</i>							
Special Dietary Requirements							

IMPORTANT: To be completed by Attending Physician.

Any family history of disease?	
Any serious operations, injuries or illness in the past?	
Any infectious diseases?	
Any eye defects? If yes, are spectacles worn and satisfactory?	
General condition	
Any ear disease/s?	
Are mouth and throat healthy?	
Teeth are well cared for?	
Are heart and lungs healthy?	
Result of chest X-ray	
Any signs of hernia?	
Urine: Any albumen? Any sugar?	
Any organic, nervous or other disorders?	
Any functional disorders?	
Is the applicant emotionally well-balanced?	
Is there any tendency to depression or history of it?	
Have you any knowledge of the applicant's lifestyle and is there any evidence of abuse of alcohol or drugs?	
Do you consider that there are any medical reasons why the applicant should not go abroad for further training?	
Does the applicant need any special diet or regular medical treatment of any kind?	

ATTENDING PHYSICIAN'S CERTIFICATION

I hereby certify that _____ is physically **fit / unfit** to participate in the **Special Academic Accompaniment Programme** of the Council for World Mission.

Signature over Printed Name of Attending Physician

Date _____

Registration No. _____

PART D

CHECKLIST FORM UNIVERSITY OF KWAZULU-NATAL

Date of Submission: _____

Applicant's Name			
Church Denomination		E-mail address	

IMPORTANT: Please make sure that you have submitted the following documents:

- Accomplished Application Form Part A
- Accomplished Application Form Part B - Church Endorsement
- Accomplished Application Form Part C – Medical Examination
- Copy of the Minutes of the Denominational Committee Approval
- Clear copy of passport pages and two (2) copies of passport size photograph
- Certified copy of Proof of other degrees
- Certified copy of official transcripts of records
If the document is in a language other than English, please provide copy of the original document and its English translation.
- Certified copy of certifications in original language.
If documents are in languages other than English, please provide copies of the original document and their English translation.
- English Language Proficiency test result
- Two (2) letters of reference (one preferably academic)
- Up-to-date curriculum vitae
- English abstract of your bachelor thesis or final project
- Essay