



UNIVERSITY OF TECHNOLOGY, MAURITIUS
 LA TOUR KOENIG
 POINTE AUX SABLES
 Telephone: 207 5250
 Fax: 234 16 60

For Office Use Only					
Application No.					
Q	NQ	P	A	E	T
APL			APEL		

APPLICATION FOR ADMISSION: ACADEMIC YEAR 20.....- 20.....

(PLEASE USE BLOCK LETTERS THROUGHOUT)

1. SURNAME

Other name(s) Mr./Mrs./Miss.....

Maiden name (if applicable)

(Enclose photocopy of marriage certificate)

2. DATE OF BIRTH

3. SEX

4. MARITAL STATUS

5. NATIONALITY

National ID No:

Day Month Year

Male Female

Married Single

Mauritian Other

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If not Mauritian, specify
 (Please attach copy of ID Card/Other Identification/Passport)

6. ADDRESS FOR CORRESPONDENCE

Telephone No. Home:
 Office:
 Mobile:

.....

Fax No.:
 Email:

7. Please fill-in either 7(a) or 7 (b), as applicable

(a) PROGRAMME OF STUDY APPLIED FOR (In Order of Preference, **Only Courses You Are Interested In**)

Programme Title

PT/FT

Code

1										
2										
3										

(b) Research Degree

(i) Research degree applied for: (*tick as appropriate*)

- Master of Philosophy (MPhil);

- Master of Philosophy with possibility of transfer to Doctor of Philosophy (MPhil/PhD);

- Doctor(s) of Philosophy (direct)

(ii) Mode of study: full-time/part-time (*delete as appropriate*)

(iii) Area(s) of Research: _____

8. EDUCATIONAL DETAILS (Note: Qualifications obtained after the closing date will not be considered)

Details of duly certified true copies of Secondary Schools and/or Tertiary Education Institutions attended.
 (Please attach copies of Academic Qualifications)

Institutions	Entered		Left	
	Month	Year	Month	Year

9. List all subjects taken, including failures, in **exactly the same order as on Certificates**. Give the three best attempts for each certificate and their years and months of examinations. Group together all subjects taken at one sitting.

9.1 SC / GCE O-Level Results	Index No. →	1 st Attempt			2 nd Attempt			3 rd Attempt		
Date of Attempt (Month/Year) →										
Subjects		Grades (e.g. 1,2,3 ... or A,B,C...)								
1.										
2.										
3.										
4.										
5.										
6.										
7.										
8.										

9.2 HSC / GCE A-Level Results	Index No. →	1 st Attempt	2 nd Attempt	3 rd Attempt
Date of Attempt (Month/Year) →				
Subjects Taken at Principal Level		Grades (A,B,C...)		
1.				
2.				
3.				
4.				
9.3 Subjects Taken at Subsidiary Level		Grades (e.g. 1,2,3 ... or A,B,C...)		
1.				
2.				
3.				

9.4 FOR MATURE APPLICANTS ONLY

Please submit a written statement together with relevant documents including:

- Copies of exams, with grades, achieved
- Details of working experience plus home and social responsibilities, detailing skills developed and practical knowledge acquired
- A reference for the working experience and other responsibilities

10. OTHER QUALIFICATIONS

It is the responsibility of the applicant to ensure and to provide proof that the qualifications meet the requirement for entry on the programmes applied for and are recognised nationally and / or considered equivalent.

	Courses/Programmes	Institutions	Grade Awarded	Duration (months)	From	To
1.						
2.						
3.						
4.						

11. THIS SECTION SHOULD BE FILLED IN BY THOSE IN EMPLOYMENT

11.1 Give all relevant information about previous and current employment, if applicable, as follows:

From		To		Name & Address of Employers/Firms	Positions Held	Job Description
Month	Year	Month	Year			

11.2 This sub-section should be filled in if the applicant is sponsored by the Employer.

Name of Employer Phone No. of Employer

(Tick as appropriate) Sponsored Released Release in process

Note: A Sponsored Applicant is one who will be released and the payment will be settled by the Employer.

11.3 DECLARATION OF EMPLOYER

I/We hereby agree to Mr/Mrs/Miss following a programme of at the University of Technology, Mauritius and I/We undertake to release him/her to follow the said programme if he/she is selected.

Date/...../..... Signature

STAMP OF EMPLOYER REQUIRED

Position

12. Have you any particular career in view?

Yes

No

If so, specify:

.....

13. REFEREES

(Please obtain their prior agreement. The University of Technology, Mauritius may write to them if you are shortlisted).

REFEREE 1

Name

Occupation

Address

Phone No.

REFEREE 2

Name

Occupation

Address

Phone No.

(One of the two referees must be the RECTOR or Careers Teacher of a Secondary School or a Responsible Officer in the Organisation where you are working)

14. THIS SECTION SHOULD BE FILLED IN IF YOU ARE UNDER 18 YEARS OF AGE

Name of parent/guardian Phone No. (if any) Home

Office

His/her address His/Her occupation

DECLARATION OF PARENT/GUARDIAN

I,, parent/guardian of the above-named
....., hereby consent to his/her signing the
declaration below and agree to be bound with him/her for the execution thereof.

Date/...../.....

Signature

15. THIS SECTION MUST BE FILLED IN BY ALL APPLICANTS

I,, solemnly declare that if
admitted to the University of Technology, Mauritius, I will

- (a) diligently follow the Programme of study for which I am selected to its termination;
- (b) inform the Registrar, in writing and without delay, if I withdraw from the Programme;
- (c) comply to all the rules and regulations of the University of Technology, Mauritius;
- (d) pay in advance all fees and dues required until the completion of studies.
- (e) incur the cost of recovering any additional outstanding balance due to the University will be borne by the student.
- (f) Inform Registrar if I am suffering from any serious illness or incapacity.

16. I also declare that the above information is true and correct.

Date/...../.....

Applicant's Signature

Please return completed Application Form together with certified photocopies of supporting documents and an Application Fee as prescribed in the advertisement, to the University of Technology, Mauritius (La Tour Koenig, Pointe-aux-Sables, Mauritius) on or before the date specified by the University.