



MSc/PhD APPLICATION (circle appropriate choice)

FOR ADMISSION TO STUDY IN 2026

Please complete this form in CAPITAL LETTERS using ink or a ball point pen.

This form is to be returned to the Department of Biological Sciences, University of Cape Town, Private Bag X3 Rondebosch, 7701, South Africa or e-mailed to soraya.abrahams@uct.ac.za

NAMES AND ADDRESSES

| | | | | | |
|-----------------------------|------------------------|---------------|--------------------|----|----|
| Surname/Last name | Title (eg Mr, Mrs, Ms) | Date of birth | DD | MM | YY |
| First Names | | | | | |
| Nationality | | | | | |
| ID Number | | | | | |
| STUDENT NO (If UCT student) | | | | | |
| E-mail Address | Term-time: | | | | |
| E-mail Address | Nov/Dec/Jan vac: | | | | |
| Tel number | Cell: | Home: | Other if necessary | | |

Medical Insurance Details:

Contact Address

Postal code:

Field of specialization (eg. Marine Ecology)

Supervisor(s):

HIGHER EDUCATION: PLEASE ATTACH YOUR FULL ACADEMIC TRANSCRIPT(S)

| Year | Tertiary Institution | Qualification |
|------|----------------------|---------------|
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TOEFEL certificate. This is a basic UCT requirement for all non-English speaking applicants. A certified copy of the certificate must be submitted with the application.

| REFEREES: Name, Title & Tel no. (Non UCT students only) | E-mail (or postal address if no email) |
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SIGNED: _____ DATE: _____