

Rhodes Business School Part Time PDEM Application Form

Please complete all your relevant details on the application form. The application form is for the Rhodes Business School Part Time PDEM

*Required

Personal Information

1. **Name of Applicant: Surname ***

.....

2. **Name of Applicant: First Name ***

.....

3. **Title: ***

Mark only one oval.

Mr.

Mrs.

Ms.

Dr.

Other

4. **Postal Address: (Please note that all correspondence will be sent to your postal address) ***

.....

.....

.....

.....

.....

5. **Residential Address: (if the same as the Postal indicate "As Above") ***

.....

.....

.....

.....

.....

6. **Contact Details: Telephone (H)**

.....

7. **Contact Details: Telephone (W)**

.....

8. **Contact Details: Telephone (Mobile)**

.....

9. **Contact Details: Email**

.....

10. **Date of birth ***

.....
Example: 15 December 2012

11. **Age:**

.....

12. **Nationality:**

Tick all that apply.

South African

Other:

13. **Gender:**

Tick all that apply.

Male

Female

Other:

Part 2: Employment History

14. **Employment summary**

List you current or most recent job first. Provide detail like dates started and ended, the name of the employer, location, nature of business and title

.....

.....

.....

.....

.....

Part 3: Education

15. Tertiary Education and Qualifications *

Provide the following: Degree Title, University, Dates attended (From/to) and Major Subjects. Please email certified copies of your tertiary education degrees, diplomas etc. to Aviwe Petsha at the Rhodes Business School <a.petsha@ru.ac.za>

.....

.....

.....

.....

.....

Part 4: Motivation to complete the PT PDEM

16. Motivation

Please provide a short motivation as to why you wish to complete the Part Time PDEM at the Rhodes Business School (Maximum 500 words)

.....

.....

.....

.....

.....

Part 5: Relevant information and notes

Please return this application form, together with a completed Rhodes University postgraduate application (Honours) form (Form C), a full official up to date academic transcript and your curriculum vitae to the address below by 30 November of the year before your proposed year of registration.

The Registrar
Rhodes University
P O Box 94
Grahamstown
6140

17. I agree that all information listed in this application is fair and valid representation of my employment and educational history *

Tick all that apply.

- Yes
- No

18. Applicant Signature

.....

