ALL FIELDS ARE COMPULSORY TO COMPLETE.

Closing date and time 16H00 on 5 January 2024

**I/ we acknowledge that this consolidated application is complete at the time of submission and that all the below criteria were met for this application to be considered.**

**kindly mark:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **New applicant** | **previously funded applicant** | **post-doctoral applicant** |
| **doctoral funding** |  |  |  |
| **post-doctoral funding** |  |  |  |

**Kindly MARK THE necessary COLUMN ON THE TABLE BELOW WITH AN ‘X’ Where applicable.**

**ELIGIBILITY CRITERIA**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **New Applicants** | | **Previously funded Applicants** | | **Post-Doctoral Applicants** | |
| ***New applicants must meet the eligibility criteria as indicated below to qualify for funding:*** |  | ***Applicants who have previously been funded by BANKSETA for the same qualification who are progressing to the next year of studies must meet the eligibility criteria as indicated below to qualify for funding.*** |  | ***Applicants who are applying for Post-Doctoral Funding must meet the eligibility criteria as indicated below to qualify for funding.*** |  |
| Copy of South African ID |  | Copy of South African ID |  | Copy of South African ID |  |
| Proof of Registration as a student |  | Proof of Registration as a student |  | Research Proposal |  |
| Research Proposal |  | Signed Progress Report on BANKSETA Template (the report must be signed by both the Applicant and their Supervisor). |  | Approval letter / proof of approval for the Research Proposal must be attached. |  |
| Approval letter/Proof of approval of the research proposal |  | Completed Application Form |  | Completed Application Form |  |
| Motivation of relevance of the research topic to the Banking Sector |  |  |  | Motivation of relevance of the research topic to the Banking Sector |  |
| Completed Application Form |  |

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **1.** | **DOCTORAL / POST-DOCTORAL STUDENT TO COMPLETE THIS SECTION IN FULL** | | | | | | |
| **1.1** | **Name & Surname of Student** | |  | | | | |
| **1.2** | **Identity Number** | |  | | | | |
| **1.3** | **Nationality** | |  | | | | |
| **1.4** | **Gender (mark with an X)** | **Female** |  | **Male** |  | | |
| **1.5** | **Race (as per BEE Act 53 of 2003)**  **(mark with an X)** | **African** | **Coloured** | **Indian** | **White** | | **Other** |
| **1.6** | **Home Language** |  | | | | | |
| **1.7** | **Disability Status (as per Employment Equity Act 55 of 998)**  **(mark with an X)** | **Disabled** |  | **Please advise what disability:** | **Not Disabled** |  | |
| **1.8** | **Applicant’s Contact Details:** | **Email** |  | | | | |
| **Cell Number** |  | | | | |
| **Postal Address** |  | | | | |
| **Physical Address** |  | | | | |
| **Municipality** |  | | | | |
| **Province** |  | | | | |

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| --- | --- | --- | --- |
| **2** | **EMPLOYER DETAILS (IF APPLICABLE)** | | |
| **2.1** | **Name of Employer (indicate if unemployed)** |  | |
| **2.2** | **SDL number** |  | |
| **2.3** | **Current Job Title** |  | |
| **2.4** | **Contact details** | **Phone** |  |
| **Fax** |  |
| **Email** |  |
| **2.5** | **Address of Employer** | **Building name** |  |
| **Street** |  |
| **Suburb** |  |
| **Postal Code** |  |
| **Municipality** |  |
| **Province** |  |

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| --- | --- | --- | --- |
| **3** | **UNIVERSITY DETAILS** | | |
| **3.1** | **Name of University** |  | |
| **3.2** | **HET registration number** |  | |
| **3.3** | **Person signing agreement between BANKSETA and HE Institution in respect of this Grant** | **Name** |  |
| **Designation** |  |
| **Contact Details** |  |
| **3.4** | **Name and Contact details of professor supervising the research student** | **Name** |  |
| **Designation** |  |
| **Contact Details** |  |

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| --- | --- | --- |
| **4** | **NAME OF DEGREE** |  |
| **4.1** | **SAQA Qualification ID – click on below link to obtain:**  [**SAQA**](https://regqs.saqa.org.za/search.php?cat=qual) |  |
| **4.2** | **Date of applicant’s first registration** |  |
| **4.4** | **Projected Completion Date of Degree** |  |

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| --- | --- | --- | --- | --- | --- |
| **5** | **RESEARCH PROGRAMME (RESEARCH PROPOSAL MUST BE APPROVED)** | | | | |
| **5.1** | **Title of Research Study** |  | | | |
| **5.2** | **Is your Research Proposal approved?**  **(mark with an X)** | **Yes** | **No** | If yes, please attach proof of approval. | |
| **5.3** | **Is this application for funding a new application or an application for subsequent funding**  **(mark with an X)** | **New** |  | **Sub-sequent Funding** |  |
| **5.4** | **Funding Amount Applied for (2023 only)** |  | |  | |
| **5.5** | **If BANKSETA has provided funding for this research before, please complete the progress report and attach**  **(mark with an X)** | **Indicate the years in which funding was received** |  | **Indicate total amount received thus far** |  |

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| --- | --- | --- | --- |
| **6** | **SUMMARY OF DOCTORAL / POST-DOCTORAL RESEARCH** | | |
| **6.1** | **Proposed Title of Dissertation** |  | |
| **6.2** | **Key question/s to be researched** |  | |
| **6.3** | **How does the research topic address scarce skills and priorities in the banking sector?** |  | |
| **6.4** | **How would stakeholders in the banking sector benefit from this research?** |  | |
| **6.5** | **Provide details of the expected outputs of the research for the current funded year** |  | |
| **6.6** | **Summary outline of research planned for the current year** | **Methodology** |  |
| **Activities for the year for which funding is requested** |  |

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| --- | --- | --- |
| **­­­­­­­­­­­­­­­­­**  **Signature Applicant**  **Date:** |  | **­­­­­­­­­­**  **Signature approving Professor.**  **Date:** |

APPLICATIONS ARE Closing 16h00 on 5 January 2024 – NO LATE APPLICATIONS WILL BE ACCEPTED.

**Please forward all documentation to:**

**Emai****l: Doctoral\_PostDoctoral2023@bankseta.org.za** and **cc** **sifisom@bankseta.org.za** and **madeleinep@bankseta.org.za**

**For more information, you may contact Sifiso Mnguni or Madeleine Pelzer on 011 805 9661**

**--------------------------------------------END-----------------------------------------------**