



ISH/SAIEE POST GRADUATE RESEARCH SCHOLARSHIP IN HIGH VOLTAGE ENGINEERING

APPLICATION FORM

IMPORTANT INSTRUCTIONS

APPLICANTS MUST SUBMIT ALL DETAILS REQUIRED BELOW, AS WELL AS THOSE DETAILED IN THE ATTACHED “INFORMATION SHEET” FAILURE TO PROVIDE THIS INFORMATION WILL RENDER YOUR APPLICATION “DISQUALIFIED”

1. Please include a motivation letter with the application form.
2. **The closing date for application forms is 28 February 2024.** Successful applicants will be notified in writing.
3. A certified copy of the highest undergraduate and post graduate degree obtained if applicable must be submitted with your application.
4. Please return the completed application with all enclosures to the Gerda Geyer - geyerg@saiee.org.za
5. The ISH/SAIEE scholarship will only be awarded for HIGH VOLTAGE ENGINEERING RESEARCH.
6. A detailed list of enclosures must be submitted with the application.
7. Please refer to the attached Information Sheet.

1. PERSONAL DETAILS

SURNAME:	
FIRST NAMES:	
POSTAL ADDRESS:	
E-MAIL ADDRESS:	
TELEPHONE NUMBERS:	
CELL NUMBER:	
WORK NUMBER:	
HOME NUMBER:	
ID NUMBER (CERTIFIED COPY OF ID DOCUMENT TO BE SUBMITTED):	
DATE OF BIRTH:	
CITIZENSHIP:	
PRESENT OCCUPATION	
CONTACT PERSONAL EMPLOYER:	
CONTACT PERSON TEL NO:	

2. APPLICANTS ACEDMIC RECORD

NAME OF TERTERIARY INSTITUTION: _____
HIGHEST QUALIFICATION: _____
DATE OF GRADUATION: _____
COPY OF CERTIFIED GRADUATE CERTIFICATE: _____
COPY OF THE ACADEMIC TRANSCRIPT FROM THE TERTIARY INSTIUTUTION DETAILING ACHIEVEMENTS IN TERTIARY STUDIES _____

3. ADDITIONAL INFORMATION

NAME OF TERTIARY INSTITUTION AT WHICH RESEARCH PROJECT WILL BE UNDERTAKEN: _____			
FOR WHICH YEAR IS SCHOLARSHIP REQUIRED:	<table border="1"><tr><td>1st Year</td><td>2nd Year</td></tr></table>	1 st Year	2 nd Year
1 st Year	2 nd Year		
HAVE YOU BEEN PROVISIONALLY ACCEPTED? _____			
WHAT WILL THE GRANT BE USED FOR, AND THE TIME FRAME? _____ _____			

4. DETAILS OF SUPERVISOR / MENTOR:

NAME OF SUPERVISOR / MENTOR:	_____
CONTACT DETAILS:	
TEL. NO/MOBILE NO.	_____
E-MAIL ADDRESS:	_____
PHYSICAL ADDRESS:	_____ _____ _____

5. NATURE OF RESEARCH PROJECT

TITLE, SCOPE: _____
ANTICIPATED OUTCOMES: _____ _____ _____
ANTICIPATED DURATION: _____ YEARS.
ANTICIPATED TIMELINE WITH VERIFIABLE MILESTONES: _____ _____
IF COURSEWORK IS NECESSARY A MOTIVATION IS REQUIRED: _____ _____
DETAILS OF OTHER GRANTS APPLIED FOR: _____ _____

6. How did you become aware of the ISH/SAIEE Scholarship?

Are you a Member of the South African Institute of Electrical Engineers: **YES / NO**

Grade: _____

Membership Number: _____

7. SPECIAL CIRCUMSTANCES (If applicable)

I request that the following circumstances be taken in to account when my application is being considered:

NAME AND SIGNATURES:

Signature of Applicant

Date:

Name of Applicant

Commissioner of Oaths

Date:

Name of Commissioner of Oaths

ENCLOSURES / CHECK LIST:

1. Completed Application Form.
2. Copy of Information Sheet with each page initialled.
3. Copy of Certified Graduation Certificate.
4. Copy of Motivation letter.
5. Other information