

Postgraduate Study Record

CLT Number:

Facilitating **CLT** and **eU** (e-learning) credits:

- Honours/Post.Grad.Dip. courses
- M/D Defence & Dissertation (through eU)

Date Reg. with eU:
Day/Mo/Yr

eU Student Number:

Entry requirement → Transfer Credits:

Hons, PGD, M or D: register for eU and fax bank-slip + forms.

Deg: _____ Year: _____

Univ/Coll: _____

Enrolled for Prog: H PGD M D

Date enrolled at CLT:

Qualification: _____

Name of programme

Subjects: (state courses, credits & marks %)

1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>
5	<input type="text"/>	<input type="text"/>
6	<input type="text"/>	<input type="text"/>
7	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>

Grad. date: %
Average

If enrolled for Masters or Doctorate:

Proposal handed in: Awaiting Yes

Extra subjects required: (Use eU codes & Credits)

_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>

Hypothesis in short: _____

Proj. Leader: _____

Name: _____

Surname: _____

ID No: _____

(Provide photocopy)

Date of Birth:

Photo: (Black & white or colour, normal 38x38mm)



This page must be on file at the responsible Learning Admin Centre with all marks regularly updated.

It must be enclosed as the **document of proof** with the next application documents in order to maintain a complete learner portfolio.

Address: _____

Street/Box: _____

Town: _____

Code: _____ (or Country)

Phone: _____

Cell/Fax: _____

email: _____

Highest previous qualification: _____

Where: _____ When: _____

(Provide photocopy)

If enrolled for Masters or Doctorate:

Date of defence:

Present: _____

Name of Project: _____