

Postgraduate Funding Office Level 3, Otto Beit Building Upper Campus University of Cape Town Rondebosch 7701

Please send this appeal once completed to: **Pgappeals@uct.ac.za**

With the subject line: APPEAL

Postgraduate Funding Appeals Form 2024

Date of Appeal: _____Academic Year: _____

Student number: PeopleSoft No:			
Surname, Name:			
Name of Current Degree /Diploma:Year of Study:			
Cell Phone Number:			
Have you been a NSFAS recipient and which year?			
Are you employed this year? (If yes, please state the hours per week, If No, then 0)			
Please note: Your UCT email address will be used as first preference for communication.			
We will not consider a repeat appeal, the Appeals Committee decision is final (i.e. Not-negotiable).			
Type of Appeal: Please tick the relevant boxes.			
A	Request re-assessment of my PG online funding application on:	Closing Date:	
	Medical grounds (Please attach proof thereof)	30 August 2024	
	Change in financial circumstance, provide 3 months bank statement)	30 August 2024	
	Other, state reason:	30 August 2024	
В	Exemption from rule to hold awards concurrently	31 July 2024	
С	2025 Extension of funding tenure for the completion of my degree	30 September 2024	
D	Request to hold funds that exceed maximum award limit	31 July 2024	
E	Deferral of award	30 September 2024	
F	Change to programme of study	29 March 2024	
G	Fee Debt (for 2023):	28 February 2024	
Н	Other:	30 September 2024	
All academic appeals must please have the Faculty Confirmation Completed in categories C and F			
Faculty Confirmation:			
Current academic year of study:			
Expected year of completion of current degree:			
Name and Surname of Course-Convenor/Supervisor:			
Signature of Course - Convenor			

Compulsory written motivation is required from you and your Course-Convenor/Supervisor to substantiate your appeal to be provided in the boxes below:		
Course-Convenor/Supervisor motivation: (The Course-Convenor/Supervisor may submit a separate document)		
Student motivation:		
Declaration: I/We declare all information to be true and that supporting documentation has been provided and further agrees that our employment and income information may be verified by UCT. I/We understand that there is no guarantee on the outcome of this appeal.		
Student Name and Surname:		

Date:

Signature: __