



higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

APPLICATION FOR APPROVAL OF A NEW ACADEMIC QUALIFICATION
[PLEASE USE A SEPARATE FORM FOR EACH PROPOSED NEW QUALIFICATION]

NAME OF INSTITUTION:	
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Name of qualification		
Resubmission: Yes/No		Reason for Resubmission:
Date of previous submission:		

GENERAL INFORMATION		
G1	Is this qualification (a) a new qualification in an approved field of study, (b) a new qualification at a higher level in an approved field of study, (c) in a new field of study?	
G2	Indicate if the proposed qualification will be replacing any existing qualification/s on the approved PQM and if so state/ list this/ these qualification/s with expected last dates of enrolment.	
G3	Indicate the delivery mode of the new qualification.	
G4	Indicate the number of credits that will be offered in (a) contact and (b) distance mode of delivery.	
G5	Indicate on which campus/es or site/s of delivery the new qualification will be offered.	

SECTION A: HEQSF INFORMATION REQUIRED		
A1	Full title of proposed new qualification.	
A2	Abbreviation of title.	
A3	HEQSF qualification type (e.g. 240-or 360-credit Diploma, Advanced Diploma, 360-or 480-credit Professional Bachelor's degrees, Professional Master's degree etc.)	
A4	NQF exit level of qualification.	
A5	Credits: Give total credits at (a) qualification level; (b) each NQF level and (c) number of credits for research where appropriate.	
A6	Designator (for degrees only).	
A7	If designator is not Arts, Commerce, Science or Social Science, indicate which first or second order CESH categories the proposed designator is consistent with.	
A8	Qualifier 1 (state the field of specialisation).	
A9	Qualifier 2 (optional).	
A10	Indicate in which second or third order CESH categories (a) Qualifier 1's field of specialisation falls, and (b) Qualifier 2's field of specialisation falls (if applicable).	
A11	Indicate what % of the curriculum for the proposed qualification falls into (a) Qualifier 1's field of	

	specialisation, and (b) Qualifier 2's field of specialisation. (Use the NQF credit values of courses for this calculation).	
A12	Indicate what % of the curriculum for the final year of the proposed qualification falls into (a) Qualifier 1's field of specialisation, and (b) Qualifier 2's field of specialisation. (Use the NQF credit values of courses for this calculation).	
A13	Specify the institution's minimum admission requirements for the proposed qualification.	
A14	Indicate the courses/ modules at entry level that facilitate vertical or diagonal articulation into the proposed qualification.	
A15	Indicate the type of Work Place Based Learning/Work Integrated Learning component for the proposed qualification.	

SECTION B: HEMIS INFORMATION REQUIRED

B1	HEMIS qualification type code.	
B2	Major fields of study by second or third order CESM category.	
B3	HEMIS course level of majors in final year of study.	
B4	HEMIS research credits expressed as a decimal of total HEMIS credits.	
B5	HEMIS minimum total time.	
B6	HEMIS minimum Workplace Based Learning/ Work Integrated Learning credits expressed as decimal of total HEMIS credits.	
B7	Indicate total subsidy units.	
B8	Indicate the funding level of the proposed qualification.	

SECTION C: OUTLINE OF PROGRAMME DESIGN

[use separate sheet if more space is needed]

SECTION D: BRIEF JUSTIFICATION FOR THE APPLICATION

SECTION E: ENDORSEMENT BY PROFESSIONAL COUNCIL/BOARD WHERE APPLICABLE

**Is the endorsement letter from a Professional Board/Council appended?
(Please tick the appropriate box)**

Yes	
No	
Not Applicable	

CERTIFICATION BY INSTITUTION THAT APPLICATION HAS BEEN APPROVED BY SENATE

DATE OF SENATE APPROVAL:

NAME:

SIGNATURE:

DESIGNATION:

DATE: