

**RECOMMENDATION FOR RENEWAL OF RESEARCH ASSOCIATE STATUS**

**Section A (TO BE COMPLETED BY RESEARCH ASSOCIATE)**

TITLE	SURNAME	FIRST NAMES
Address	TELEPHONE NUMBERS	
	Home:	
	Work:	
	Cell:	
Code:	E-mail:	

**Date:** ..... **Applicants Signature:** .....

**Section B**

Elaborate on the RA’s contribution/accomplishments/outputs during the tenure of the appointment:

- i. Supervision of M/Ds. ....
- ii. Workshops facilitated. ....
- iii. Conference papers/accredited journals/books/chapters published.  
.....

Kindly indicate the following:

- i. Nominee’s disciplinary field (e.g. physics, public medicine, inorganic chemistry etc.):  
.....
- ii. Nominee’s research focus area/specialisation:  
.....

**1. Attach the following:**

- Updated CV
- Biographical details form from HR website (please ensure that it is the most recent version)

**2. SUBMIT FORM WITH SUPPORTING DOCUMENTS TO THE HEAD OF DEPARTMENT**

**Section C**

**RECOMMENDATION: DIRECTOR OF SCHOOL / HEAD OF DEPARTMENT**

.....  
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.....  
.....

.....  
**SIGNATURE**

.....  
**DATE**

**SUBMIT FORM AND SUPPORTING DOCUMENTS TO THE Faculty Committee FOR DECISION**

*(To be completed by Committee secretary)*

*RECOMMENDATION BY Faculty Committee*

RECOMMENDED:(√)   
NOT RECOMMENDED:(√)

.....  
**DATE**

.....  
**SIGNATURE**

**SUBMIT COMPLETED FORM WITH SIGNATURES + SUPPORTING DOCUMENTATION TO**  
**[VISHA.COOPASAMY@MANDELA.AC.ZA](mailto:VISHA.COOPASAMY@MANDELA.AC.ZA)**

**PASTE EXTRACT OF THE MINUTES OF Committee Resolution IN THE BLOCK BELOW**