

## School of Health and Rehabilitation Sciences Faculty of Health Sciences

Divisions of Communications Sciences and Disorders, Nursing and Midwifery, Occupational Therapy, Physiotherapy

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## **Division of Physiotherapy**

## PhD APPLICANT'S QUESTIONNAIRE:

To assist us with the selection process, please would you fill out the following questionnaire in as much detail as possible and return to:

Dr Theresa Burgess (theresa.burgess@uct.ac.za)

| Name:            | Age: |  |
|------------------|------|--|
| Mailing address: |      |  |
|                  |      |  |
| Telephone:       |      |  |
| Email:           |      |  |

GENERAL: Attach a full curriculum vitae, including the following information.

- (i) Degrees already attained and number of years required for completion of each:
- (ii) Degree for which you are currently registered:
- (iii) University at which you are currently registered:
- (iv) Number of years you have been registered:
- (v) Publications: local and internal
- (vi) Degree for which you are applying

| What general area of P  | hysiotherapy are y   | you particularly i | nterested in and wh | 1у? |
|-------------------------|----------------------|--------------------|---------------------|-----|
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| In what particular spec |                      |                    | trate your research | ?   |
| (You don't need to spec | ify particular thesi | s project/s)       |                     |     |
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| What are your ultimat  | e career plans?    |                 |                |    |  |
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| How do you plan to fin | nance your studies | s? Please provi | de some detail | s. |  |
| Scholarships:          |                    |                 |                |    |  |
|                        |                    |                 |                |    |  |
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| Part-time work:        |                    |                 |                |    |  |
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| Other:                 |                    |                 |                |    |  |
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