

REPUBLIC OF MAURITIUS

MINISTRY OF EDUCATION, TERTIARY EDUCATION,

SCIENCE AND TECHNOLOGY

Mauritius-Africa Scholarship Application Form for Undergraduate Programmes

2020 Edition

For Office Use Only

Reference Number	
Received on	
Received by	

MAURITIUS-AFRICA SCHOLARSHIP

The Government of Mauritius is awarding scholarships to deserving students who are resident citizens of member states of the African Union or of an African Commonwealth country to pursue higher studies in a registered public Higher Education Institution (HEI) in Mauritius.

The duly completed application form should be submitted through the *Nominating Agency* of the respective countries. A list of Nominating Agencies can be found on the website of this Ministry at <u>http://ministry-education.govmu.org/English/educationsector/Pages/Tertiary-Education.aspx</u>

No direct application to the Mauritian Ministry of Education, Tertiary Education, Science & Technology will be entertained.

APPLICATION CHECKLIST

Copy of Birth Certificate

Copy of biodata page of passport, if available

Copies of end of secondary school level educational certificates (e.g GCE 'O' level or IGCSE or A level or Baccalaureate..)

Copies of transcripts of end-of-secondary school results

Endorsement by Nominating Agency (Section 5)

Medical certificate filled and signed by a Registered Medical Practitioner (**Section 6**)

Copy of letter of conditional offer by a public higher education institution in Mauritius **OR** copy of acknowledgement notice from the HEI

ORIGINAL CERTIFICATES SHOULD NOT BE SENT WITH THE APPLICATION FORM

Further information

A list of the registered public HEIs offering full-time on-campus higher education programmes can be found at **Section 8** of the *Guidelines for Applicants* or from the website of Tertiary Education Commission <u>http://www.tec.mu/public institutions</u>

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If you have answered 'YES', provide brief details of the illness or disability and any special requirements or support you may require to complete your programme of study on a separate sheet of paper. Please attach a copy of your doctor's assessment of your needs.																				
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EMERGENCY CONTACT DETAILS Person to be contacted in case of emergency, if different from the above.																	
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	LANGUAGE PROFICIENCY (please tick where appropriate)									
	EN	GLISH			FRENCH					
Written	□Good	□ Fair	Poor	□Good	□ Fair	Poor				
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Have you ever taken a TOEFL or IELTS (for English) or DILF/DELF/ DALF (for French) test? If YES, provide date and score (attach documentary evidence).

SECTION TWO: DETAILS OF ACADEMIC QUALIFICATIONS

Certified copies of academic qualifications, together with the mark sheets, must be provided. The most recently completed qualification is to be listed first.

1			
(eg Higher Scho Geneva, etc):	ation obtained at end of Secondary School Le ool Certificate/ Cambridge CIE, GCE Advanced Level	/ Cambridge CIE, Bacca	aureate/ IB
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List details of relevant academic distinctions or prizes received, if any.	
List any scholarships previously received, if any. (<i>Provide details such as duration of</i> <i>the scholarship(s), the qualification</i> <i>or course undertaken, and the date</i> <i>completed.</i>)	

SECTION THREE: PROPOSED COURSE OF STUDY

Provide details of the public Higher Education Institution(s) and programme(s) of study you have applied for in Mauritius.

Copy of a **letter of offer** <u>or</u> **acknowledgement notice** from the public Higher Education Institution(s) must accompany this application. The information below must match the information in the correspondence from the Higher Education Institution(s).

PROGRAMME OF STUDY	COURSE CODE
	PROGRAMME OF STUDY

SECTION FOUR: DECLARATION

CONDITIONS OF THE SCHOLARSHIP

If I am awarded a scholarship under the Mauritius-Africa Scholarship Scheme, I agree that the scholarship may be terminated if I do not comply with the conditions attached to it. I will also abide by the '**Guidelines for Applicants**' and understand that I:

• will be eligible for tuition fees (paid directly to the HEI) as per grid below;

SN	Beneficiaries from	Applicable Rate	Tuition Fee paid up to
1	SADC Countries	Local Fees	MUR100,000
2	Non-SADC Countries	International Fees	MUR160,000
1	-+ 40 Neurophen 0040 4 110D		

(as at 19 November 2019, 1 USD – MUR 36.93)

- will be eligible for an assistance to meet living expenses of not more than MU12,500 monthly;
- will be eligible for refund of the student airfare (economy class) by the most economical route to Mauritius at the start, and airfare to my home country upon successful completion of studies;
- will accept the scholarship only for the approved study programme for which it is offered and that **no changes whatsoever will be allowed**;
- will comply with the rules and regulations of the Higher Education Institution;
- will agree to the disclosure of information pertaining to my academic progress to the relevant Mauritian authorities for administrative purposes;
- will have to comply with all the laws of Mauritius, including immigration laws, and I will be solely responsible for my actions;
- will leave Mauritius at the end of my studies;

DECLARATION

This section must be completed and signed by the applicant.

Note that incomplete, inadequate or inaccurate filling of the form may result in the applicant's elimination from consideration. Any false information given or concealment of any relevant information may lead to termination of the scholarship.

I,(full name), the undersigned, declare that the particulars in this application are true and accurate, and that I have not willfully suppressed any material fact.

Date:

Signature:

SECTION FIVE: NOMINATING AGENCY ENDORSEMENT

This section is to be completed by an authorised officer of the Nominating Agency in the	country of
citizenship of the applicant.	

As the Nominating Agency on behalf of the Government in the country of origin of the applicant,

I nominate (fill in Name of Applicant):

|--|--|--|--|--|

for a Mauritius-Africa Scholarship on behalf of the Government of: (fill in Country name)

Name of Authorising Officer	
Name of Official Nominating Agency (e.g Ministry of Education)	
Position	
Email	
Website (if any)	
Signature	
Date	
Official Stamp/Seal	

SECTION SIX: MEDICAL CERTIFICATE (To be filled by a Registered Medical Practitioner)

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