

### **FORM C**

## **UNISA PRACTICAL MUSIC EXAMINATIONS**

## **APPLICATION FOR APPROVAL OF AN ALTERNATIVE WORK**

PARTICULARS OF TEACH	IER		
Surname and Initials			
Postal address			
		Postal code	
Tel/Cell/Mobile no			
Email			
PARTICULARS OF STUD	ENT		
Full names and surname			
Examination session and year			
Examination Instrument		Grade	
ALTERNATIVE WORK TO	BE PRESENTED		
List			
Composition	Composer:		
(indicate movements clearly)	Title:		
Duration <sup>1</sup>			
SIGNATURE		DATE	

# Please email copy of alternative work plus this application form to

shortme@unisa.ac.za or adamssa@unisa.ac.za

#### or mail to

Mr Sean Adams, Directorate Music, OR Tambo Administration Building, Room 5-35, Preller Street, PO Box 392, Unisa Main Campus, Muckleneuk Ridge, Pretoria 0003

Enquiries: Tel: 012 429 2615