

FORM D**UNISA PRACTICAL MUSIC EXAMINATIONS****APPLICATION FOR APPROVAL OF CHOIR/ENSEMBLE/JAZZ ENSEMBLE
REPERTOIRE**

PARTICULARS OF TEACHER			
Surname and Initials			
Postal address			
		Postal code	
Tel/Cell/Mobile no			
Email			
PARTICULARS OF CHOIR/ENSEMBLE/JAZZ ENSEMBLE			
Name			
Examination session and year			
Category		Grade*	
WORKS TO BE PRESENTED			
List A	Composer:	Title:	Duration:
List B	Composer:	Title:	Duration:
List C	Composer:	Title:	Duration:

SIGNATURE	DATE

* Elementary/Intermediate/Advanced

Please email copies of all works 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: 012 429 2615