

FORM C

APPLICATION FOR APPROVAL OF AN ALTERNATIVE WORK

PARTICULARS OF TEACHER			
Surname and Initials			
Unisa Music Registration No			
Postal address			
		Postal code	
Tel/Cell/Mobile no			
Email			
PARTICULARS OF STUDENT			
Full names and surname			
Examination session and year			
Examination Instrument		Grade	
ALTERNATIVE WORK TO BE PRESE	ENTED		
List			
Composition	Composer:		
(indicate movements clearly)	Title:		
Duration ¹			

In compliance with the Protection of Personal Information Act (POPIA), the personal information collected here is solely intended for use by the Professional Division of the Directorate Music and Unisa. I understand that in terms of POPIA and other laws of the country, there are instances where my express consent is not necessary in order to permit the processing of personal information, which may be related to investigations, litigation or when personal information is not publicly available. I shall not hold the university responsible for any improper or unauthorized use of personal information that is beyond its control. I have read this declaration in its entirety and understand the contents and implications thereof.

SIGNATURE		DATE	
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Please email copy of alternative work plus this application form to

adamssa@unisa.ac.za or ndalaat@unisa.ac.za

or courier to

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

Enquiries: Tel: 012 429 2615/2913