

FORM H

REQUEST FOR THE REMARKING OF A THEORY OF MUSIC EXAMINATION SCRIPT

A PARTICULARS OF REQUESTER OF THE	REMARK			
Surname and full names of student				
Unisa registration number				
ID No				
Postal address				
			Postal code	
Tel/Cell/Mobile no				
Email				
B PARTICULARS OF EXAMINATION SCRI	PT TO BE REMARK	ED		
Surname and full names of student				
Unisa registration number				
Paper and Code				
Examination Year and Session				
Reason for requesting remark				
C FEES				
The fee payable for the remarking of an examination script is 50% of the examination entry fee.				
D DECLARATION AND POPIA DECLARATION				
I hereby declare that I am the requester of the remarking of the examination script and that the information as supplied is true and correct.				
Protection of Personal Information Act (POPIA) Declaration:				
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.				
Signed at	this	day of	20	
SIGNATURE (REQUESTER) RELATIONSHIP TO STUDENT				
Banking details:				

Banking details: Bank: First National Bank Acccount holder: UNISA Income Account Account no: 627 9962 5200, Branch code: 250645 (Sunnyside), Swift code: FIRNZAJJ (for international deposits) Reference: Surname and initials of student or parent

Email this form with proof of payment to adamssa@unisa.ac.za