

FORM A**UNISA MUSIC EXAMINATIONS****ACCREDITATION APPLICATION****PERSONAL INFORMATION**

Surname											Title								
Full names																			
Unisa Music Registration No																			
Gender	Female		Male																
Identification No													Date of birth	Y	Y	M	M	D	D
Country of birth											Nationality								
Residential address											Postal/Courier address								
		Postal code											Postal code						
Contact details	Home tel											Cell/Mobile							
	Email																		

Qualifications (list from highest to lowest; attach CV)

Year completed	Qualification	Institution
Teaching experience (in years)		

Please tick the appropriate block below If you agree, please indicate the lessons you are offering.

I agree		that my name and contact details be included in the list of Unisa accredited Music teachers on the webpage of the Directorate Music at Unisa
I do not agree		List instruments/Theory of Music for which you offer lessons: _____

Please tick to confirm that all required documents are attached

All copies must have been certified within the last three (3) months

	Certified copy of highest music qualification
	Certified copy of ID
	Certified copy of marriage certificate if surname on qualification differs from current surname on ID
	Certified copy of matric certificate if highest music qualification is a graded music certificate
	Curriculum vitae (CV) especially detailing qualifications and teacher experience

Signature		Date	
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Please EMAIL documents to Mr Sean Adams at adamssa@unisa.ac.za or courier them to Mr Sean Adams, Directorate Music, OR Tambo Administration Building, Room 5-35, Preller Street, Unisa Main Campus, Muckleneuk Ridge, Pretoria 0003