

ACCREDITATION APPLICATION

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	<input type="checkbox"/>	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	<input type="checkbox"/>	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**

<input type="checkbox"/>	Certified copy of highest music qualification
<input type="checkbox"/>	Certified copy of ID
<input type="checkbox"/>	Certified copy of marriage certificate if surname on qualification differs from current surname on ID
<input type="checkbox"/>	Certified copy of matric certificate if highest music qualification is a graded music certificate (Practical and Theory)
<input type="checkbox"/>	Curriculum vitae (CV) especially detailing qualifications and teacher experience

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

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