

POSTGRADUATE DIPLOMA HERITAGE MANAGEMENT APPLICATION FORM

Please note:

1. Surname:			
2. First Name(s):			
3. Preferred Name:	4. Age:		
5. Nationality			
6. Indicate the degree yo	ou have completed or are completed	ting: Date (Year)	
(e.g. B.A.)	University:		
Majors:			
Rhodes University Stude	ent Number (if applicable)		
7. Contact postal addres	s, telephone number and e-mail a	ddress:	
Term:			
E-mail address:	Telephone Number:		
8. Contact postal addres	s, telephone number and e-mail a	ddress:	
Vacation			
	Telephone Number:		

9. Explain why you would like to attend this programme (250 words).				

10. Describe your career aspirations. (250 words)				

APPLICATIONS Please email this form with a full official up to date academic transcript and your curriculum vitae (CV) to registrar@ru.ac.za
Applications to be received by 30th November