

SATS JUNIOR TRAVELLING FELLOWSHIP APPLICATION FORM

THIS APPLICATION MUST BE TYPED CLEARLY

INSTITUTION:		
FULL NAME OF APPLICANT:		
PERMANENT ADDRESS:		
TEL (HOME):	TEL (WORK):	CELL PHONE:
FAX:	EMAIL:	
DATE OF BIRTH:		
CITIZENSHIP:		
PRESENT PROFESSIONAL STATUS:		
DEPARTMENT IN WHICH EMPLOYED:		
DO YOU OCCUPY THE POST ON A PART-TIME OR FULL-TIME BASIS?		
ARE YOU A PAID-UP MEMBER OF SATS?		

DEGREES/ DIPLOMAS	FIELD OF STUDY	UNIVERSITY/ TECHNICON	YEAR	DISTINCTION

EXPERIENCE TO DATE

NAME OF EMPLOYER/INSTITUTION	CAPACITY AND TYPE OF WORK	PERIOD

NAME AND CONTACT DETAILS OF HEAD OF UNIT OR DIVISION FROM WHOM
REFERENCE REPORTS MAY BE ASKED:

THE FOLLOWING ELECTRONIC DOCUMENTS MUST
ACCOMPANY THIS APPLICATION

1. Full CURRICULUM VITAE
2. Letter of motivation as to why the applicant would like to attend the course and his/her future plans

I certify that the above information is correct and that I am a paid-up member of SATS.

DATE

SIGNATURE OF APPLICANT