



RHODES UNIVERSITY
Where leaders learn

POSTGRADUATE DIPLOMA IN MEDIA MANAGEMENT

APPLICATION FORM

1. Surname:

2. First Name(s):

3. Preferred Name: 4. Age:

5. Nationality

6. Are you applying for the full-time or online/distance programme?
.....

7. Indicate the degree you have completed or are completing: Date (Year)

(e.g. B.A.) University:

Majors:

Rhodes University Student Number (if applicable)

8. Contact postal address, telephone number and e-mail address:

Term:

E-mail address: Telephone Number:

9. Contact postal address, telephone number and e-mail address:

Vacation

E-mail address: Telephone Number:

10. Explain why you would like to attend this programme.

11. Describe your career aspirations

APPLICATIONS

Please return this form, together with a completed Rhodes University honours application form, a full official up to date academic transcript, a motivation letter and your curriculum vitae to the address below by 30 November of the year before your proposed year of registration.

**The Registrar
Rhodes University
P O Box 94
Grahamstown
6140**