

Individual Application for form

First Name and Last Name

ID Number (Please attach copy)

Email

Contact Number

Gender

Male

Female

Other

Rather not specify

Organisation (if applicable)

Physical Address

Postal Address (current)

Specify program you are applying for

Filmography (if applicable)

Motivation for participation

7. If you are applying for the *IsiZulu Virtual Script Writing Workshop* please submit a script of not more than **six pages**.

Centre for Creative Arts, University of KwaZulu-Natal

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