

**CAPRISA RESEARCH PLACEMENT PROGRAMME (CRPP)  
APPLICATION FORM**

<b>1. Personal Information</b>				
Surname/last name:				
First name(s):				
Gender:				
Race:				
Student number:				
Current year of study:				
Field of study:				
Physical address:				
Home telephone number:				
Cellphone number:				
Email address:				
<b>2. Please attach a copy of your CV to this application.</b>				
<b>3. Do you have internet access?</b>			<b>YES</b>	<b>NO</b>
<b>4. Please rate your computer literacy on the scale below:</b>				
Non-existent	Poor	Fair	Good	Excellent
<b>5. How did you find out about the CRPP?</b>				
<b>6. What aspects of research (clinical, laboratory, community, etc) are you interested in?</b>				

**7. What motivated you to apply to become a Research Placement at CAPRISA?**

**8. Which Community do you come from or would you like to work in?**

**9. Have you undertaken any ethics course? If so, please provide details.**

**10. What would you consider a key achievement as a result of your participation of the CRPP?  
(for repeat applications only)**

Thank you for applying to the CRPP. Please forward your completed application form to Sma Mzobe:

Email address: [Sma.Mzobe@caprisa.org](mailto:Sma.Mzobe@caprisa.org)

Telephone number: 031-2604555

Postal address: CAPRISA, 2<sup>nd</sup> Floor K-RITH Tower, Nelson R Mandela School of Medicine, Private Bag X7,  
Congella, 4013, DURBAN

**FOR OFFICE USE ONLY**

**1. Allocation of stipend funding source by Training Coordinator**

Stipend: ..... Cost Centre: .....

Signature: ..... Date: .....

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**2. Approval by Financial Manager**

Signature: ..... Date: .....

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**3. IT manager**

Shared computer available .....

Signature: ..... Date: .....

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**4. Office Manager**

Shared workstation available .....

Signature: ..... Date: .....

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**5. Award letter drafted and sent**

Signature: ..... Date: .....

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**6. Entered into research placement database and updated on SAGE:** YES  NO

Signature: ..... Date: .....