



SOCIETY OF RADIOGRAPHERS OF SOUTH AFRICA (SORSA) FUND

The aim of this fund is to encourage members to attain further qualifications for the purpose of professional advancement that will impact positively on clinical service delivery in any category of radiography.

The fund is available to members with suitable registerable qualifications and who have been paid-up full (ordinary) members of the SORSA for not less than four (4) consecutive years.

The following courses offered at South African institutes of higher education can be considered:

1. Post graduate qualifications in radiography.
2. Post graduate qualifications of not less than 120 credits in relevant fields to improve knowledge and skills for service delivery purposes, (courses could be in human resources / labour relations / risk management / or MBA degree, for example).
3. Short courses of not less than 30 credits that are directly relevant to job descriptions of radiographers for clinical service delivery including management knowledge and skills.
4. Short courses of not less than 30 credits that are directly related to in-service training and development for improvement of service delivery in any radiographic category.

Criteria for awarding the fund

All applications must be completed on the SORSA fund application form to reach the Administrative Office, P.O. Box 6014, Roggebaai 8012 before 30 June each year.

The successful applicant will be required to submit a paper on-line for potential publication in *The South African Radiographer*. Applicants must familiarize themselves with on-line publication requirements : www.sar.org.za

All applications will be screened by the national council education representative for tabling at the next national council meeting.



APPLICATION FOR SORSA EDUCATION AWARD

**PO BOX 6014
Roggebaai
8012**

This award is available to members with suitable registerable qualifications and who have been paid-up full (ordinary) members of the SORSA for not less than four (4) consecutive years. Kindly consult guidelines for this award.

Title		Initials		Surname			
Branch name				Date of membership	4 or more consecutive years full paid up member?	YES	NO

Name of course/program:

Duration of course/program: **If relevant number of credits:**

Provide motivation for your application in terms of meeting the guidelines of impacting positively on clinical service in any category of radiography [if necessary use separate sheet of paper]. Motivation must be typed using font size 10.

MOTIVATION

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I hereby acknowledge that I have read and understood the guidelines for this award. I will abide by any decision taken by National Council in making this award.			
Signature		Date	

Signed and dated application to reach the Administrative Office by 30 June.