

Society of Australian Genealogists
CERTIFICATE IN GENEALOGICAL RESEARCH

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Surname:

Given Names:

Titles: Mrs/Mr/Miss/Ms/Dr/other:

SAG Membership #:

Address:

Postcode:

Email:

Telephone: (hm) (wk) (mob)

Facsimile: (hm) (wk)

Current Occupation:

Please provide a short statement (maximum of 300 words) giving some details about your educational background, your reason for wishing to undertake the course and an indication of how you intend to make use of the skills and knowledge gained from undertaking the Certificate course. [attach if preferred]

Applications for 2010 are open from **12 February - 31 March**. You must be a financial member of the SAG both when you apply and throughout your studies. A non-refundable fee of \$350 will be payable by 30 April if your application is successful.

I hereby apply for admission as a candidate in the Certificate in Genealogical Research and declare that the information given on this form and the attachments is accurate. I have read the Regulations governing the Certificate Course current as at 1 February 2010 and agree to abide by them.

Signature:

Date: