Open Access Publication Funding Application Form

Please return the completed, signed form via email or fax to Ilse de Lange, email idl@sun.ac.za. Fax 021 808 3723

Section A. – Main respondent’s details.
Name: ________________________________
Surname: ________________________________
SU no.: ________________________________
Faculty name: ________________________________
Department/School/Unit name: ________________________________
Telephone no.: ________________________________
E-mail address: ________________________________

DATE of Application: ____________________________

Section B. – Article details.
Title of article: ________________________________
Name of journal: ________________________________
Name of publisher: ________________________________
Date of publication: ____________________________(if an existing publication, please enter the date the article was published)

Section B¹. – Affiliate author details
1. Author name: ________________________________
   Author surname: ________________________________
   SU no. (if external author please indicate the institution): ________________________________
   E-mail address if SU affiliate: ________________________________

2. Author name: ________________________________
   Author surname: ________________________________
   SU no. (if external author please indicate the institution): ________________________________
   E-mail address if SU affiliate: ________________________________

3. Author name: ________________________________
   Author surname: ________________________________
   SU no. (if external author please indicate the institution): ________________________________
   E-mail address if SU affiliate: ________________________________

4. Author name: ________________________________
   Author surname: ________________________________
   SU no. (if external author please indicate the institution): ________________________________
   E-mail address if SU affiliate: ________________________________

Section C – Funding required.
Open Access fee: ________________________________
Full/Partial? (Indicate which option) ________________________________
If Partial, indicate Stellenbosch University’s Contribution ________________________________
Have the publication costs of this research / article already received funding (e.g. grant, donation or faculty funding)? ________________________________

More than 4 authors please add their name, surname, personnel number or name of institution as an additional document and attach it to the application form.
Section D – Publishers’ details.
Name of publisher: ____________________________________________
Name of Contact person at publisher (Optional): ________________________________
Contact person’s email and telephone number: ________________________________
Website address: _________________________________________________________

Section E – Other pertinent information that may contribute to the success of the application:
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Herewith I undertake to submit a copy of this article to the SUNScholar Institutional Research Repository (http://scholar.sun.ac.za/) within two weeks of it being approved for publication.

Main respondent’s signature:
__________________________________________

Office Use Only:

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Date: ___________________________

Signature: Director: Technical Services and Electronic Resources Management:
__________________________________________