

**UNIVERSITY OF SOUTH AFRICA**  
**INDEPENDENT CONTRACTORS (FACE-TO- FACE-**  
**TUTORS/VIRTUALLY)**  
**COLLEGE OF ACCOUNTING SCIENCE**

**Purpose:** The purpose of the job is to facilitate learning at a UNISA Regional Centre; through face-to-face/hybrid and video conferencing tutorials; on Saturdays and/or weekday evenings in the subjects identified.

**Specific requirements**

**Minimum of an Masters ' degree in the subject that you would like to tutor' or a PhD degree in Accounting Sciences/ Registration with a Professional Body (such as SAICA, CIMA, CIA).**

**COMPETENCIES, SKILLS AND ATTRIBUTES**

- Willingness to undergo training on various aspects of tutoring.
- Teaching/tutoring experience will be an advantage.
- Ability to work with diverse learners.
- Demonstrate Computer Literacy
- Good Interpersonal Skills
- Own electronic device and data

**Recommendation**

- Proficiency in English
- Willingness to travel to the Region

**Face to face tutor positions are available in the following College of Accounting Science:**

FAC1501: Introductory Financial Accounting  
FAC1502: Financial Accounting Principles, Concepts and Procedures  
FAC1503: Financial Accounting Principles for Law Practitioners  
FAC1601: Financial Accounting and Reporting  
FAC1602: Elementary Financial Accounting and Reporting  
FAC2601: Financial Accounting for Companies  
FAC2602: Selected Accounting Standards and Simple Group Structures  
FAC3704: Group Financial Reporting  
FAC3703: Specific Financial Reporting  
FAC3702: Distinctive Financial Reporting  
AIN1501: Accounting Information Systems in a Computer Environment  
AIN2601: Practical Accounting Data Processing  
MAC1501: Introduction to Management Accounting  
MAC2601: Principles of Management Accounting  
MAC2602: Principles of Strategy, Risk & Financial Management Techniques  
MAC3701: Application of Management Accounting Techniques  
MAC3702: Application of Financial Management Techniques  
MAC3761: Management Accounting III  
MAC3703: Selected Accounting & Financial Management Techniques  
AUE2601: Auditing Theory and Practice  
AUE1501: Introduction to Auditing  
AUE3761: The Audit Process  
AUI3702: The Internal Audit Process: Test of Controls  
TAX1501: Taxation of Salaried Persons  
TAX3701: Taxation of Business Activities

TAX3761: Taxation of business activities and Individuals

FAC3764: Financial Accounting

## Duties

### Face-to-Face Tutors will have the following duties:

1. Training for effective tutoring face-to-face/hybrid learning
2. Manage students learning experiences
3. Facilitate students' interactions with their peers
4. Preparation for tutoring face-to-face/hybrid learning
5. Face-to-face/hybrid facilitation of learning
6. Feedback to the teaching team

**Assumption of duty:** February 2024, pending sufficient enrolment of students.

**Remuneration: R 389.35 per hour**

*Appointments will be made in accordance with Unisa's Employment Equity Plan.*

We welcome applications from Persons with Disabilities



### To apply, you need to do the following:

You are required to attach scanned certified copies (certified within the previous six months) of the following documents

- Attached the Face-to-face Form
  - Certified copy (within the previous six months) of highest educational qualification
  - Certified copy (within the previous six months) of academic transcript
  - Certified copy (within the previous six months) of your identity document/passport
  - Certified copy (within the previous six months) of your valid permit (foreign applicants)
  - Certified copy (within the previous six months) of SAQA verification of foreign qualifications (if applicable)
- and;**
- A comprehensive curriculum vitae

**SEND THE APPLICATION TO CASE-F2F@UNISA.AC.ZA**

**Closing Date: 17 Oct 2023**

**General Enquiries:** Ms Masegare Phaahla  
**Contact number 012 429 8693**

UNISA reserves the right to authenticate all qualifications without further consent from the applicant. Late, incomplete and incorrect applications will not be considered.

UNISA reserves the right not to make an appointment and correspondence will be limited to short-listed candidates only. If you have not been contacted within 2 months after the closing date of this advertisement, please accept that your application was not successful

[Regional Centres \(unisa.ac.za\)](http://unisa.ac.za)

|   |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
|---|--|---|----------------------------------|--|-----------------------------------|----------------------------------|--------------------------------|---|-----------------------------|--|
| <b>SURNAME<sup>1</sup></b>                |  |   |                                  | Title  |                                   |                                  |                                |   |                             |  |
| <b>FULL NAMES</b>                         |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
| College/Faculty                           |  | Unisa Learning Centre <i>(see advert)</i> |                                  |  |                                   |                                  |                                |   |                             |  |
| Academic Department                       |  | Position Reference                        |                                  |  |                                   |                                  |                                |   |                             |  |
| <b>Modules (Max of 3)</b>                 |  | 1   | 2                                | 3  |                                   |                                  |                                |   |                             |  |
| Race                                      |  | B <input type="checkbox"/>                | C <input type="checkbox"/>       | I <input type="checkbox"/>                       | W <input type="checkbox"/>        | Female <input type="checkbox"/>  | Male <input type="checkbox"/>  | Disability Yes <input type="checkbox"/> | No <input type="checkbox"/> |  |
| Registered disability                     |  | Total <input type="checkbox"/>            | Partial <input type="checkbox"/> | Mental <input type="checkbox"/>                  | Physical <input type="checkbox"/> | Hearing <input type="checkbox"/> | Sight <input type="checkbox"/> |   |                             |  |
| Identification number                     |  |   |                                  |  |                                   |                                  | Date of birth                  |   |                             |  |
| Income tax number                         |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
| Country of birth                          |  |   |                                  |  |                                   | Nationality                      |                                |   |                             |  |
| Are you a South African citizen by birth? |  | Yes <input type="checkbox"/>              | No <input type="checkbox"/>      | If no indicate the date citizenship was acquired |                                   |                                  |                                |   |                             |  |
| <b>Foreign Nationals</b>                  |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
| Passport no                               |  | Country of issue                          |                                  | Expiry date                                      |                                   |                                  |                                |   |                             |  |
| Work permit no                            |  | Type of permit                            |                                  | Expiry date                                      |                                   |                                  |                                |   |                             |  |
| Permanent residence status                |  | Yes <input type="checkbox"/>              | No <input type="checkbox"/>      | Date granted                                     |                                   |                                  |                                |   |                             |  |
| Residential address                       |  |   |                                  | Postal address                                   |                                   |                                  |                                |   |                             |  |
|   |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
|   |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
| Postal code                               |  |   |                                  | Postal code                                      |                                   |                                  |                                |   |                             |  |
| Telephone numbers                         |  | Home                                      |                                  |  |                                   | Work                             |                                |   |                             |  |
|   |  | Cell                                      |                                  |  |                                   | E-mail <i>(Compulsory)</i>       |                                |   |                             |  |
| <b>Emergency Contact Details</b>          |  | Relationship                              | Next of kin                      | Child  | Spouse                            | Friend                           |                                |   |                             |  |
| Initials & surname                        |  |   |                                  |  |                                   | Tel no                           |                                |   |                             |  |
| Current Studies                           |  | Qualification                             |                                  | Institution                                      |                                   |                                  |                                |   |                             |  |
| <b>Qualifications<sup>2</sup></b>         |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
| Year completed                            |  | Qualification                             |                                  |  |                                   | Institution                      |                                |   |                             |  |
|   |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
|   |  |   |                                  |  |                                   |                                  |                                |   |                             |  |
| Signature                                 |  |   |                                  |  |                                   |                                  |                                |   |                             |  |

**For office use:**

|                                   |  |
|-----------------------------------|--|
| Claim System number/Oracle number |  |
| Task Number                       |  |

<sup>1</sup> To be completed by incumbent

<sup>2</sup> From highest to lowest