

Department of Linguistics

June 2014



MODULE:	Language Practice 2A (LPR2AA2)
PAPER:	Language Practice
EXAMINERS:	Ms L Rokebrand Dr E Cornelius
MODERATOR:	Ms S Dose
DATE:	7 June 2014 (08:30)
MARKS:	100
TIME:	3 hours

This paper consists of FIVE (5) pages.

Answer ALL questions in sections.

SECTION A
Document management
4 marks

NOTE: You have created, in advance in class, a Dropbox account.
You will use this Dropbox account in this exam.

- 1.1 On your computer, create a folder with the name <Your surname, initials and student number. (2)
- 1.2 Save this folder on the desktop.
- 1.3 Open a blank Word file. Name this file <Exam answers_Your surname and initials>. (2)

SECTION B
Word-processing in Microsoft Word
15 marks

- 2.1 In this Word file, list TEN **different aspects** to which an editor will pay attention during a **light edit**. This should be in the form of a bulleted list. (10 + 2 = 12)

2.2 Save this file in the folder you created on the desktop (see Section A, number 1.1 above). (1)

2.3 Open the file with the name *Malaria in SA*, available in your Dropbox account.

2.4 Save this file in the folder you created above (see Section A, number 1.1) with the following name: Exam text_mark up visible_Your surname and initials. (2)

SECTION C
Editing in Microsoft Word
65 marks

3.1 Set the language to English (U.K.). (2)

3.2 Do a **light edit**, in Track Changes, of the text in this file. Your brief: Do a light edit of the text provided to you. This text will be published in the form of an informative brochure on malaria. The target readership consists of people who often travel in malaria areas in and around South Africa. Your client is the national Department of Health.

3.3 When editing, pay attention to the **textual items** on your list (see Section B, number 2.1 above; remember, you saved the bulleted list as a separate file). (30 + 5 = 35)

3.4 (a) Provide **five annotations** in the form of Comments in which you explain your most important editorial decisions. (10 + 2 = 12)

(b) In each case, indicate whether you assumed the role of **gatekeeper**, or the role of **therapist**. (5)

3.5 (a) Raise at least **two author queries**, also in the form of Comments, in which you ask pertinent questions to the author of the text. (4)

(b) Mark your author query in the conventional way. (2)

3.6 Run a **spell check**. (5)

SECTION D
Information mining
14 marks

- 4.1 (a) Look up, on a reputable website, the spelling of the specific medication mentioned in the text (should it be "Quinnine" or "Quinine"?).
(b) At the location where the name of the medication occurs in the text, provide the address of the website (the URL) you consulted for this purpose in the form of a Comment and indicate which form is correct. (3 + 3 = 6)
- 4.2 (a) In this same Comment box, indicate what this medication is also commonly used for, apart from its antimalarial properties. (2)
(b) Again, also provide the address of the website (the URL) you consulted. (2)
- 4.3 Save this file again under the name you have given the file in Section B, number 2.4 above.
- 4.4 Make a **clean copy** of the document and save this document in the same folder you created on the desktop (see number 1) as follows: Exam text_clean copy_Your surname and initials. (4)

SECTION E
Submitting your work
2 marks

- 5.1 Upload the folder you created in Section A number 1.1, with its contents, to your Dropbox account. (1)
- 5.2 Share this folder with Ms. Leane Rokebrand (lrokebrand@uj.ac.za). (1)

NOTE: You may only leave the exam venue once your folder has been successfully uploaded to your Dropbox account and shared with Ms. Rokebrand. You have to confirm this with Ms. Rokebrand in the exam venue.

Malaria in South-Africa

The keeping-in-mind of Malaria in South-Africa is paramount to your visit if your journey passes through northern Kwazulu Natal or Mpumalanga. The African Bush and malaria is a almost automatic association. At one time the northern areas of Kwazulu-Natal were viewed as really dangerous. Early maps of malaria risk in south-Africa shows Saint Lucia as being the only place in the country where one could get malaria at any time of the year but of course things have improved quite a bit since then but one still has to keep looking critically at the malaria situation.

Facts about Malaria in Africa

1. Mosquitoes' build up a resistance to diverse forms of anti-Malarial drugs - do please seek latest advice from your travelling clinic;
2. Malaria is probably Africa's No. 1 most widely spread disease.
3. In most regions of Africa you should take protection measures. Although it is not possible to protect yourself totally you can reduce the risk of getting a serious sometimes life threatening outbreak of the disease.
4. It is advisable you take some from of prophylactic drugs (get the latest advice from your doctor/ pharmacist or a Tropical Diseases Hospital)
5. Cover yourself up between dusk & dawn, use a mosquito repellent and mosquito net and stay away from non-moving water and damp dark places.
6. Malaria can take from 7 days to several months to develop.
7. The symptoms range from head aches, pain and flu-like aches to sometimes experiencing disorientation and high temperatures.

8. you should look for medical advise there and then if you develop any of these symtoms.
If you are not able to reach medical help straight away doctors recommend you self treat with Quinine without delay and see a doctor as soon as possible.
9. Malaria will hit you more seriously if you are recovering from another illness or are week and malnutrioned.
- 10.The parasite can stay in your system for a number of years.
- 11.As a final note and speaking from personal experience, it must be said that there is a lot of paranoia in western societies about Malaria and many people will be put-off visiting a country altogether if it keeps on to pose a risk.
- 12.If you develop any symtoms that could be Malaria, after you home return, always remember to mention to your physiciat that you have travelled in a Malaria Zone.
- 13.On the whole (excluding Cerebral Malaria), if treatment is sought and preventive medicines are taken, Malaria does not usually kill - in fact in many countries the local inhabitants regard it much like we in western societies regard the flue