

## **Registration Form**

Full Name & Surr	name:	
Gender:	Race:	Marital Status:
Address:		
Suburb:		Area Code:
Contact No1:	Cont	act No 2:
Email Address: _		
Date of Birth:		
ID Number:		
Do you have a di	ate disability:	No C
	paying for the course?:	centre
Self = *Sp	oonsor/Company	Guardian or Parent
*If sponsored, w	who/what is the name of yo	our sponsor or company?

The following must accompany the Registration form:			
<ul> <li>A certified copy of your Identity Document</li> <li>Certified copies of all academic qualifications</li> <li>Curriculum vitae</li> </ul>			
Please select one of the following: Full Time Part Time:			
Indicate the Course you are applying for:			
Accredited Courses:			
Occupational Certificate: Occupational Trainer NQF Level 4			
Occupational Certificate: Electrician NQF Level 4			
☐ ARPL Trad <mark>e Tes</mark> t			
Other Courses:			
☐ Module 0 - Induction			
☐ Module 1 - Installing Wireways			
☐ Module 2 - Installation of Cables			
☐ Module 3 - Wiring of Premises			
☐ Module 4 - Three Phase Transformers			
☐ Module 5 - Motors and Starters			
☐ Module 6 - Testing of Installation			
☐ Gap Training			
□ Gap Training centre □ Trade Test Preparation			
☐ Evaluation			
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Acknowledgment of Application & Registration Process:			
I(Student Name & Surname),			
am fully aware that if I am registering for the Modular Training, these courses			
are not accredited courses but are acknowledged & recognized by SAN Training Centre in order to build portfolios of evidence.			

SAN Training Centre is a division of SAN Building Maintenance cc and is Registered with the Quality Council for Trades and Occupations. Company Registration No: 2006/067088/23

In-case of Emergency Details:			
Full Name & Surname:			
Relationship:			
Contact Number:			
Applicant Name:			
Applicant Signature:			
Date:			
Witness Name:			
Witness Signature: raining centre			
Date:			