



**CAREER CHOICE (Mark in Appropriate box with an 'X')**

Choose in order of preference, the trades you are applying for. Write the number 1 and 2 in the relevant box of your choice.

<b>QUALIFICATION AREAS</b>	<b>Choice</b>	<b>Committee Approval – Official Use Only</b> (Please, do not write in this space)
National Vocational Certificate in Automotive Mechatronics L3		
National Vocational Certificate in Clothing Production L3		
National Vocational Certificate in Cosmetology L3		
National Vocational Certificate in Facility Maintenance L3		
National Vocational Certificate in Front Office L3		
National Vocational Certificate in Housekeeping L3		
National Vocational Certificate in Information and Communications Technology L3		
National Vocational Certificate in Plumbing and Pipefitting L3		
National Vocational Certificate in Welding and Metal Fabrication L3		

**EDUCATIONAL (TERTIARY) HISTORY**

Institution Attended:		Region:
Address:		
Phone:	Fax:	Year of Examination:

**EDUCATIONAL (HIGH SCHOOL) HISTORY**

Highest Grade Passed:	
Name of the School:	Town:

**Subjects of the Highest Grade Passed**

Subjects	Levels	Grades/ Symbols

**EMPLOYMENT INFORMATION (If applicable)**

Employer:	<input type="checkbox"/>
Employer address:	
Phone:	Fax:
Town:	Region:
Position held:	Duration:
Email Address:	

**FINANCIAL ASSISTANCE (Mark in Appropriate box with an 'X')**

Do you need financial assistance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you need hostel accommodation? If yes, fill the hostel form.	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**HEALTH PARTICULARS**

Do you have any Disability?
If yes, state the nature of your disability.
Based on your disability, do you have any special need/s? (Please specify)
Do you suffer from any chronic disease/s?
Please specify.

**PERSONAL PROTECTIVE EQUIPMENT**

Shoe Size: \_\_\_\_\_ Overall Size: \_\_\_\_\_ Shirt Size: \_\_\_\_\_ Skirt/Trouser Size: \_\_\_\_\_  
Chef Uniform Trouser Size: \_\_\_\_\_ Chef Uniform Jacket Size: \_\_\_\_\_

**DECLARATION**

I hereby confirm that all the information provided is correct to the best of my knowledge, and that all the attached supporting documents are authentic. Any false information will lead to my application being disqualified.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**FOR OFFICE USE ONLY (Do not fill in please)**

Payment:

Receipt Number:

Status of the Application: Admitted  Not Admitted

Reason(s):

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