

SKILLS DEVELOPMENT SPECIALISTS cc

CK 1997/032844/23 TETA Accreditation No: TETA03-022 SAAFF Member No: SN 50139

10 John Adams Road, Waterfall, 3652 PO Box 2061, Hillcrest, 3650

VOIP: 087 551 0047 SDS Cell: 071 413 6415

E-Mail: marelee@sdstraining.co.za Website: www.sdstraining.co.za



FOR SDS	USE:	EN:	II	NVOICE:		SL:	CL:	
Please note your booking will only be confirm								
CONTRACT OF ENROLMENT						receipt of this completed form. Please e-mail to: marelee@sdstraining.co.za		
(PLEASE INCLUDE A COPY OF YOUR ID/PASSPORT)						i lease e-mail to. <u>marelee@sustrammg.co.za</u>		
NAME OF COURS					START DATE:	INVESTMENT:		
REGION ATTEND	ING COU	RSE (JI	HB, DBN, PEZ ET	C.):	ASSESSM	ENT REQUIRED? (Pleas	e tick) YES or NO	
(Please tick applica	n)			(Assessment is contracted out by SDS and is not included in the				
				course fee				
First Name(s)					Surnar	ne		
IDENTITY NO:								
COMPANY								
NAME &								
POSTAL ADDRESS	Postal (ostal Code Tel			no. Cell no.			
STUDENT EMAIL ADDRESS			(PLEASE PRINT CLEARLY)					
STUDENT POSITION	PANY							
SUPERVISOR/MA		Email address:						
INVOICE DETAILS (COMPLETE IF COMPANY SPONSORED)								
ACCOUNTS CONTACT PERSON: COMPANY VAT REGISTRATION No.:								
NAME: EMAIL ADDRESS: CLIENT ORDER NUMBER (IF APPLICABLE):								
EMAIL ADDRESS:				CLILINI				
In the event of unforeseen circumstances, SDS reserves the right to change the program, dates or venue. Courses are subject to a								
minimum number of students and should a course be cancelled for this, or any other reason, an alternative course date will be arranged. If attendance is not possible on the alternative date, any fees already paid will be refunded in full.								
Conditions:								
1. The full course fee is to be paid on or before the starting date of the training course. Any amount not paid on the due date will carry interest at 2.5% p.m. 2. A certified copy of the relevant pre-entry qualification must accompany this enrolment form (where applicable)								
3. The student and sponsor undertake to pay legal collection costs on an attorney and client scale, including collection and tracing fees, should Skills Development Specialists institute action for								
recovery of any arrears amounts. 4. This is the full agreement between the parties, and no indulgence granted by Skills Development Specialists will be deemed to be a waiver of any rights of Skills Development Specialists or								
operate as an estoppel. 5. No variation or consensual cancellation of this agreement will have any force or effect unless reduced to writing and signed by both parties.								
6. Skills Development Specialists reserve the right of admission. 7. The following service level documentation in respect of the training provided as stipulated on this enrolment form are available (upon written request addressed to the Manager Training: Henri								
de Goede email henri@sdstraining.co.za): Attendance/Self-Test Register (T5), Course Evaluation Questionnaire (T1), Trainee Performance Evaluation (T2), SDS Letter of Final Course Result.								
8. TETA Provider Statement of Qualifications and Unit Standards available from Henri de Goede email henri@sdstraining.co.za upon written request. If you cannot attend the course:								
9. You may send a <u>substitute</u> delegate in your place, subject to notification of these changes at least three working days before the start of the training course and provided the substitute student has completed the required pre-qualification test.								
10. You may transfer once at no charge to another course, provided you do so in writing at least 5 working days before the course. Transfers inside of 5 days will be charged a late transfer fee of								
20%. 11. You may <u>cancel</u> your registration, <i>in writing</i> , up to 5 working days before the course takes place, however a 10% cancellation fee will be levied. Cancellations inside of 5 days will be liable for								
the full fee. 12. Unfortunately <u>no refund or credit</u> can be given to delegates who do not attend without giving prior notice.								
I, and We,								
The abovemention	<u>ed studen</u>	<u>ıt</u>	<u>The</u>	<u>sponsoring</u>	company / P	arent or Guardian (if private	<u>ly sponsored)</u>	
Hereby agree to be jointly and severally liable for the total fee. I/we further agree to accept the above terms and I/we will be liable for all costs incurred.								
SIGNATURE STUDENT SIGNATURE COMPANY/ PARENT								
DATE				COMBA	NIV STAMP			
DATE				COMPA	MIT STAIVIP.			