



LEARNER INFORMATION AND ENROLMENT FORM TRADES

INSTRUCTIONS:

Please complete the form in neat capital letters.

Where there are blocks provided, use one character per block.

Where there are options, please choose the correct one by marking it with a cross.

Only complete the sections which pertain to your enrolment.

All Prices quoted are inclusive of VAT. Accommodation prices are listed per person per night and includes all meals.

Please submit this form with proof of your registration payment at our offices or fax it to 034 622 5386 or e-mail to dsihadmin@dsih.co.za

SECTION 1 TRADE

Electrician	R 53 010.00	<input type="checkbox"/>	Millwright	R 78 660.00	<input type="checkbox"/>
Fitter	R 42 750.00	<input type="checkbox"/>	Fitter and Turner	R 77 080.00	<input type="checkbox"/>
Diesel Mechanic	R 59 850.00	<input type="checkbox"/>	Turner	R 54 520.00	<input type="checkbox"/>
Motor Mechanic	R 59 850.00	<input type="checkbox"/>	Marine Engineering	R 66 690.00	<input type="checkbox"/>

SECTION 2 ACCOMMODATION & TRANSPORT

Do you require on-campus accommodation? Yes No

If yes please Specify: Single R 225.00 Sharing R 190.00

Do you have any dietary requirements? Yes No

If yes please specify: _____

Do you want to make use of the shuttle service **at a fee**? Yes No

SECTION 3 PERSONAL DETAIL

ID Number

Date of birth

Title Gender

Surname _____

Full names _____

Telephone Number

Cell Number

Email Address _____

Physical Address

Postal Address Code

Preferred Language

PPE Sizes Overall Top Pants Shoes

Please attach clear **uncertified** copies of the following documents:

ID Detailed CV

Qualifications



SECTION 4 NEXT OF KIN - CONTACT DETAILS IN CASE OF EMERGENCY

Title

Miss	Mrs	Mr	Other
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 Relationship _____

Surname _____

Full names _____

Telephone Number

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Cell Number

--	--	--	--	--	--	--	--	--	--

Physical Address

Code

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SECTION 5 FETPAC DETAIL

Are you physically disabled?

Yes	No
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Nationality _____

If not RSA are you a permanent resident?

Yes	No
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Equity

Black	White	Indian	Coloured
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Previous year's activity

Working	School	Study
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Highest school qualification

Grade 12	Grade 11	Grade 10	Grade 9
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SECTION 6 HEALTH DETAIL

<p>Allergies <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Asthma <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Blood disorder <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Cardiac condition <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Diabetes <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Medical Aid _____</p> <p>Doctor _____</p>	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	<p>Epilepsy <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Psychiatric condition <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Chronic condition <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Other: <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Yes</td><td>No</td></tr></table> Specify _____</p> <p>Member Number _____</p> <p>Tel Number _____</p>	Yes	No	Yes	No	Yes	No	Yes	No
Yes	No																		
Yes	No																		
Yes	No																		
Yes	No																		
Yes	No																		
Yes	No																		
Yes	No																		
Yes	No																		
Yes	No																		

SECTION 9 AGREEMENT

- 1 I am fully aware that I must attend 80% of my classes in order to write trade test.
- 2 I agree to write all tests. The dates will be determined by DSIH.
- 3 I undertake to use all the facilities of DSIH with care and at my own risk.
- 4 If I make use of any transport arrangements of DSIH and take part in activities and excursions arranged by DSIH I do so at my own risk.
- 5 I indemnify the DSIH management and Board of Directors and/or any employee of the DSIH of any liability regarding myself, my family or property in case of damage, theft, injury or death or for any reason whatsoever.
- 6 I am fully aware that unannounced police intervention may occur on campus as required.
- 7 I accept that in all courses where practical work is compulsory for completion of the qualification, the responsibility remains my own to adhere to the set requirements safety procedures.
- 8 I am fully aware that a toolbox with appropriate tools to my trade is a course requirement and I must obtain my own toolbox. The required tool list specification is available from DSIH.
- 9 I undertake to take care and look after all DSIH property, tools and equipment, and understand that I will be held liable for repair/replacement costs should I be found guilty of damages to DSIH Property, Tools and equipment.

I AM FULLY AWARE THAT:

- 1 Should I cancel my classes, no fees will be refunded.
- 2 Repeated failure will disqualify me from registration at DSIH.

SECTION 10 DECLARATION

I, the abovementioned, hereby declare that I have filled in the form completely and to the best of my knowledge. All the information is true and correct and I fully understand the forms contents.

Signature

Date

(Parent or guardian if learner is under the age of 21 years)

Signature

Date

Full Names

ID Number