DEPARTMENT OF LABOUR

OCCUPATIONAL HEALTH AND SAFETY ACT 85 OF 1993
APPLICATION FOR ACCEPTANCE AS A CANDIDATE FOR THE EXAMINATION/S

The Secretary
Commission of Examiners
Private Bag X117
PRETORIA
0001

COMPLETE CLEARLY

According to regulation 2 (5) of the Regulations concerning the Certificate of Competency, 1990, I hereby apply to be accepted as a candidate for the examination for a Certificate of Competency as *Mechanical / Electrical Engineer (Factories).

1. Surname (block letters) : _____

2. First name (block letters) : _____

_____

3. Postal Address : _____

_____ Code: _____

4. Date and place of birth: _____

5. Identity No (Immigration permit No.): _____

6. Telephone No.: (h) _____ (w) _____

7. Email Address: _____

Included are copies of my engineering qualifications, certified to be true copies of the original documents by a Commissioner of Oaths. Listed below are the necessary documents:

1. 1.1 Certified copy of my Degree/Diploma in *Mechanical/Electrical engineering.
   1.2 Certified statement of my academic results (minimum pass mark is 50%).
   1.3 Subject content of your degree/diploma so that it may be evaluated (if applicable).

2. 2.1 Certified proof of a completed apprenticeship and trade test certificate.
   2.2 A letter of good conduct from and verified by signature of the employer.
   2.3 Proof of 2 years post-graduate experience on an official letter detailing positions held and nature of work done in the maintenance and operation of machinery, from and verified by the signature of previous / present employer/s.
   2.4 Certified copy of my identity document.
   2.5 Certified copy of mine certificate (if applicable).
   2.6 Proof of payment: Receipt of R130.00 payable at any Labour Centre or Bank

Account Holder:	Department of Labour
Bank:	First National Bank
Account Number:	62025135577
Branch code:	253145
Reference:	OHS: GCC – (your name and initials)

* Delete whichever is not applicable.

IMPORTANT: Foreign qualifications must first be evaluated by the South African Qualifications Authority (SAQA) and submit certificate of evaluation.

_____ _____
SIGNATURE OF APPLICANT **DATE**

RECORD OF QUALIFICATIONS AND EXPERIENCE

EXAMINATIONS FOR CERTIFICATES OF COMPETENCY FOR MECHANICAL AND/OR ELECTRICAL ENGINEERS

No credit is given for qualifications or experience claimed unless supported by documentary evidence with translations if not not in English or Afrikaans

1. Christian names and surname of applicant: _____ Signature: _____

2. Professional and technical qualifications: _____ Date: _____

Name of certificate or diploma	Issuing authority	Date of issue	Remarks

3. Practical experience, not included in curriculum of above course, to be given in chronological order:

Document Number	Designation of post	Name of employer	Period of employment					Type of experience gained (Use symbol "M" for, "E" for electrical and "M-E" for combined mechanical and			
			From (date)	To (date)	Period						
					Years	Months	Days	Operation and maintaining	Erecting	Testing	Drawing

Nommer van bewysstuk	Benamings van pos	Naam van werkgewer	Dienstydperk					Tipe van ondervinding opgedoen. (Gebruik simbol "W" vir werktuigkundige, "E" vir elektriesse en "W-E" vir gekombineerde werktuigkundige en elektriese masjinerie)			
			Van	Tot	Tydperk						
			(datum)	(datum)	Jare	Maande	Dae	Bediening en instandhounding	Oprigting	Toetsing	Tekening