

EKURHULENI ARTISANS & SKILLS TRAINING CENTRE ENROLMENT FORM (Submit a week before you start)

Company reg No: 2006/053318/23
43 B Maxwell Street
Kempton Park
1619

Tel: 011.394 1488 * 011.970 3082/3/4/5
Fax: 011.394 3154
Cell: 082 605 1134
email: queries@eastc.co.za

Consultant:	
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COURSE INFORMATION:	
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Method of payment:	Cash	Deposit	EFT
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Starting date:	
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STUDENT INFORMATION:	Surname:			
	First Names:			
	I D No:			
	Postal Address:			
		Code:		
	Home Address:			
		Code:		
	Telephone:	(H)	(W)	Cell:
Std of Education:				

Spouse or family Member:	Surname:			
	First Names:			
	Telephone:	(H)	(W)	Cell:

Company Information:	Approved by:	Initials:	Surname:	
	Position:			
	Name of Company:			
	Company Reg No:			
	Company Vat No:			
	Postal Address:			
		Code:		
	Physical Address:			
	Code:			
Telephone:	(W)	(F)	Cell:	

ENROLMENT POLICIES AND PROCEDURES

COMPANIES * STUDENTS

- * Enrolment forms must be completed and returned before course can begin.
- * Full payment must be confirm before course can commence
- * No REFUNDS (In case of refunds a 10% handling fee will apply)

CLASSES:

- * Students are expected to attend a minimum of 70% of the classes otherwise they will be asked to repeat the course at their own cost.
- * If the company is paying for the course, the HR Dept. or Manager in charge of the student will be notified accordingly.

FREE NEEDS: B/MAKING

Toolbox
Overall
Safety Shoes
Scientific Calculator
Mathematical set
Gloves / Ear Plugs
5m Tape
T-Shirt

FREE NEEDS: WELDING

Toolbox
Overall
Safety Shoes
Helmet
Gloves / Ear Plugs
Welding Cap
T-Shirt

FREE NEEDS: PLUMBING

Toolbox
Overall
Safety Shoes
Gloves
Tool Kit
T-Shirt

FREE NEEDS: CNC

Toolbox
Overall
Safety Shoes
Scientific Calculator
T-Shirt

FREE NEEDS: AIRCON & R & ELECTRICAL

Toolbox
Overall
Safety Shoes
Tool Kit
T-Shirt

FREE NEEDS: RIGGING

Toolbox
Overall
Safety Shoes
Gloves / Ear Plugs
T-Shirt

Training will be conducted at own risk.

Under no circumstances will courses be changed after commencement (Signature)

I want you to send my contact details to the Labour Brokers to enable me to get a job

Yes:	No:
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I, _____ (print full names and surname) have read and understand the above terms and conditions and will adhere by them.

I, _____	COMPLETE IF COMPANY APPROVED
Student Name	Approved By: (Print Initials and Surname)
And we _____ The sponsoring Company (where applicable)	(Print Position)
hereby agree to be jointly and severally liable for the total fee. I / We further agree that failure to attend lectures will not deduct my / our responsibility for the fees for the full course.	Invoice for the attention of:
Cancellations within 10 working days prior to course commencement date will incur a cancellation fee to the value of 50% of course fee	Signature: _____
Student Signature: _____	Company Stamp:
Date: _____	

**NO CASH PAYMENTS ACCEPTED
ONLY BANK DEPOSIT SLIPS AND PROOF OF EFT'S**

Bank Details:

*Ekurhuleni Artisans & Skills
Training Centre CC*
Bank: **FNB**
Branch: **Woodbridge**
Account No: **62139090287**
Branch Code: **205609**

OR

*Havenga Steel Construction
Training Centre*
Bank: **ABSA**
Branch: **Central Avenue**
Account No: **40-6627-8520**
Branch Code: **632005**

USE ID No FOR REF

Fax enrollment form, copy of student ID and deposit slip to 011.394 3154