

SETA ACCREDITATION NUMBER: ETD 10839



Education for Practitioners in Early Childhood Development (Pty) Ltd
ACCREDITED ECD TRAINING PROVIDER REGISTRATION NUMBER 2575

ENROLMENT/REGISTRATION FORM

Please PRINT CLEARLY and legibly. This information is necessary to register you as a STUDENT with the required Qualifications Authority and therefore must be ACCURATE and CORRECT. Use the information as it appears on your Identity Document OR Passport.

PERSONAL DETAILS									
TITLE (Tick box)	MISS		MRS		MS		MR		
SURNAME				FIRST NAME					
MAIDEN SURNAME				NAME YOU ARE KNOWN BY					
IDENTITY NUMBER									
PASSPORT NUMBER				DATE OF BIRTH					
NATIONALITY									
GENDER	FEMALE		MALE			OTHER:			
POPULATION GROUP	AFRICAN	ASIAN	COLOURED	INDIAN	WHITE	OTHER:			
MARITAL STATUS	SINGLE		MARRIED	DIVORCED	WIDOWED	OTHER:			
EMPLOYMENT STATUS	EMPLOYED		UNEMPLOYED	STUDENT	OTHER:				
DISABILITY	YES	NO	If yes, please specify:						

HIGHEST STD/ GRADE PASSED			
PREVIOUS QUALIFICATIONS	Matric Certificate (or equivalent) – to be attached		
SUBJECTS PASSED	Subjects Passed		
Any ECD Experience / Other			
CONTACT DETAILS	HOME	WORK	CELL
HOME ADDRESS			
WORK ADDRESS			
EMAIL ADDRESS			

SECTION B: REGISTRATION DETAILS	
COURSE/ QUALIFICATION REGISTERING FOR:	

SECTION C: PAYMENT PLAN OPTION				
REGISTRATION FEE	FEE DEPOSIT		FEE INSTALMENTS	
DATE PAID:	AMOUNT	DATE	AMOUNT	MONTH

PLEASE NOTE

- A non-refundable enrolment fee of R200-00 is payable on submission of this registration form.
- All monthly payments are due on the 1st of every month.
- Learners will not be permitted to attend training if fees are outstanding.

FINANCIAL OBLIGATIONS

Learners are obligated to ensure that payment of fees be made on time as per agreement. In the event of overdue payment not being settled, Edu P Earl reserves the right to

- Withhold the issuing of learner's official transcript
- Withhold the awarding of learner's qualification
- Withhold further registration
- To take necessary legal action against learner

Should you withdraw from the course all refunds will be calculated according to the discretion of Edu P Earl. In the event of a learner having a third party agreeing to pay course fees, the learner is still the responsible individual for payment of fees except in special circumstance as per the discretion of Edu P Earl.

SECTION D: FINANCIAL AGREEMENT

I, _____ (Full Name) hereby confirm that I have read and understand the terms and conditions of this financial agreement and am therefore bound by its terms.

LEARNER'S SIGNATURE:

DATE:

PLACE:

(Fill if applicable)

PARENT/GUARDIAN FULL NAME

PARENT/GUARDIAN SIGNATURE:

DATE:

PLACE:

THIRD PERSON RESPONSIBLE FOR PAYMENT OF FEES (If applicable)

To be completed by third party

FULL NAME OF RESPONSIBLE PERSON _____

NAME OF ORGANISATION _____

TELEPHONE: _____ CELL _____

EMAIL: _____

PHYSICAL ADDRESS: _____

SIGNATURE: _____ DATE _____ PLACE _____

SECTION E: REGISTRATION CHECKLIST

Please ensure that the following are accompanying your registration form or else registration will not be processed. Tick the checklist if attached.

1. Certified copy of your identity document	
2. Certified copy of your matric certificate or highest school report	
3. Certified copies of previous courses/ workshops/qualification	
4. Two (2) passport size photographs	
5. Your C.V. (curriculum vitae)	
6. Registration fee of R200-00	

OFFICIAL USE – TO BE COMPLETED BY EDU P EARL OFFICIAL**Name of Learner:****Edu P Earl Learner Number:****Course:****Training Venue:****Training Day:****ANY COMMENTS:****Start Date:****End Date:****Date certificate Issued:**

