

NATIONAL CERTIFICATE: COMMUNITY DEVELOPMENT NQF LEVEL 5 LEARNER APPLICATION

Programme Notes:

1. This is a 12 months modular training programme comprising 40% theory followed by 60% mentor guided work based application (theoretical practice application) in each module.
2. Entry level: FETC (Grade 12) or equivalent or a NQF Level 4 recognised qualification – and, as necessary, prospective Learners are assumed to be competent in: i) Communication at NQF Level 4; and ii) Mathematical Literacy at NQF Level 4. Language of instruction is English.
3. The programme is available face-to-face or via the CEFA “my-eLEARNING” online electronic media platform (see computer requirements information).
4. A Mentor, who is a senior community development professional with at least three years of experience, should be found by you the learner or, if necessary, found with CEFA assistance.

This form may be completed on-line. Please print and sign this form before sending it to CEFA

LEARNING METHOD REQUIRED (circle your answer):

| | | |
|---------------------------------------------------------|-----|----|
| Face-to-Face (i.e. classroom) method of learning? | YES | NO |
| my-eLEARNING (i.e. online computer) method of learning? | YES | NO |

If the e-platform online method of learning is required, please indicate if you have the following necessary computer equipment? (Circle your answer.)

| | | |
|-------------------------------------------|-----|----|
| Computer equipment (if applicable): | YES | NO |
| Processor: 1.0GHZ or higher | YES | NO |
| Hard Drive: 40 GB hard drive | YES | NO |
| Memory: 1+ GB | YES | NO |
| Windows XP with Service Pack 2 (or later) | YES | NO |
| Internet connection | YES | NO |

| <i>For official use:</i> | <i>Application approved</i> | | <i>Learner number:</i> | | | |
|------------------------------------------------------------------|-----------------------------|-----------------------|------------------------|----------|--|--|
| | <i>Fully:</i> | <i>Provisionally:</i> | | | | |
| PERSONAL INFORMATION | | | | | | |
| IDENTITY NUMBER (ID)* | | | | | | |
| SURNAME | | | | | | |
| FIRST NAME | | | | | | |
| MIDDLE NAME | | | | | | |
| TITLE (Miss, Mrs, Mr, other) | | | | | | |
| DATE OF BIRTH | CCYY / MM / DD | | | | | |
| EQUITY <i>(for report purposes only)</i> <i>(mark with x)</i> | AFRICAN | COLOURED | WHITE | INDIAN | | |
| GENDER <i>(for report purposes only)</i> <i>(mark with x)</i> | MALE | | FEMALE | | | |
| MARITAL STATUS <i>(mark with x)</i> | SINGLE | MARRIED | DIVORCED | WIDOW/ER | | |
| HOME LANGUAGE | | | | | | |
| SECOND LANGUAGE | | | | | | |
| NATIONALITY | | | | | | |
| DISABILITY DESCRIPTION <i>(if applicable)</i> | | | | | | |
| PROVINCE | | | | | | |
| HIGHEST QUALIFICATION | | | | | | |
| CONTACT INFORMATION | | | | | | |
| LANDLINE NUMBER | | | | | | |
| CELL NUMBER | | | | | | |
| FAX NUMBER | | | | | | |
| POSTAL ADDRESS | | | | | | |
| | | | | | | |
| POSTAL CODE | | | | | | |
| | | | | | | |
| PHYSICAL ADDRESS | | | | | | |
| | | | | | | |
| | | | | | | |
| POSTAL CODE | | | | | | |
| EMAIL ADDRESS | | | | | | |
| ALTERNATIVE CONTACT: | | | | | | |
| NAME | | | | | | |
| CONTACT NUMBER | | | | | | |

***Please supply three copies of both your ID document and school certificate, certified not more than three months ago by a Commissioner of Oaths (e.g. at a police station) – either with the Application or upon induction to the course.**

FEES AND PAYMENT INFORMATION

COURSE FEES

The full course tuition fee for the face-to-face classroom method of learning is R19 700.00 and for the my- eLEARNING online platform method of learning is R17 300.00, A non- refundable fee of R 800.00 towards the tuition fee is payable after application acceptance of the course. A further R 4 500.00 towards the tuition fee is payable before the registration date.

Two payment options are:

Option 1: 5% discount on payment in full up front.

Face to face: R 19 700.00 – 5% = R 18 715.00

my-eLEARNING: R 17 300.00 – 5% = R 16 435.00

Option 2: R 800.00 + R 4 500.00 + 12 equal payments paid monthly.

Face to face: R 19 700.00 = R 800.00 + R 4 500.00 + (R 1 200.00 x 12 paid monthly)

my-eLEARNING: R 17 300.00 = R 800.00 + R 4 500.00 + (R 1 000.00 x 12 paid monthly)

For more information, please see the 2020 Fees Booklet on our website.

| FEE TOWARDS TUITION R 800,00 (non-refundable payable with application approval) | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| NAME OF BANK | Standard Bank |
| NAME & CODE OF BRANCH | Tyger Manor 050410 |
| ACCOUNT NAME | Continuing Education for Africa |
| ACCOUNT NUMBER | 083048030 |
| ACCOUNT TYPE | Current |
| REFERENCE NUMBER | Please quote your ID number on the deposit as reference |
| PAYMENT OPTION | Option 1: Full Amount with 5% discount Option 2: Course fee in 12 equal installments with no discount |
| PARENT / GUARDIAN / EMPLOYER (if you are employed) RESPONSIBLE FOR COURSE FEES PAYMENT (if not paid by applicant) IF APPLICATION IS SUCCESSFUL. | |
| PARENT / GUARDIAN / SPONSOR INFORMATION | |
| NAME AND SURNAME | |
| TEL. NUMBER | |
| FAX NUMBER | |
| CELL NUMBER | |
| EMAIL ADDRESS | |
| PARENT/GUARDIAN IDENTITY/PASSPORT | |
| RELATIONSHIP TO YOU | |
| EMPLOYER INFORMATION (if applicable) | |
| NAME / COMPANY NAME | |
| TEL. NUMBER | |
| FAX NUMBER | |
| ID NO. / CO. REGISTRATION NO. | |
| VAT NUMBER (if applicable) | |
| EMAIL ADDRESS | |
| POSTAL ADDRESS | |
| POSTAL CODE | |
| HOW DID YOU HEAR ABOUT CEFA? | |

DECLARATION & UNDERTAKINGS BY APPLICANT

I the undersigned declare that:

- i. the information provided by me in this application form is true and correct;
- ii. I, together with my parent, guardian, employer or sponsor (if applicable), will be responsible for the payment of all course fees due by virtue of my agreement with CEFA upon acceptance and enrolment as a learner;
- iii. I have acquainted myself with the rules and regulations of CEFA which are aligned with Post-School Education and Training regulations and policy.

SIGNED AT _____ THIS _____ DAY OF _____ 20 .

Signature of LEARNER

Date

Witness Signature

Date

DECLARATION & UNDERTAKINGS BY PARENT OR SPONSOR

I the undersigned declare that:

- i. the information provided by me in this application form is true and correct;
- ii. I hereby accept responsibility together with my child or person I am sponsoring for the payment of all moneys that are due to CEFA during the total duration of his or her training study at CEFA and undertake to ensure that all payments are paid punctually when due.
- iii. I understand that interest will be charged on all outstanding amounts on a monthly basis

SIGNED AT _____ THIS _____ DAY OF _____ 20 .

Signature of Parent or Sponsor

Date

Witness Signature

Date

DOCUMENTS CHECKLIST

In order to apply the following documents are required:

| | DOCUMENT | Y | N |
|----|-------------------------------------------------------|---|---|
| 1. | Completed Application Form. | | |
| 2. | ID – one (1) certified copy | | |
| 3. | Curriculum Vitae (CV). | | |
| 4. | Highest school qualification – one (1) certified copy | | |

Documents required in support of your Application may be submitted either with it or upon induction to the course.

If applying by mail, please submit your Application and any accompanying documents without delay to:

CEFA

**The Manager: Teaching and Learning
PO Box 173
Wellington, 7654
Contact number: 021 873 3998**

If applying by email please send your Application and any accompanying documents to application@cefa.co.za

If applying in person, please bring your Application and any accompanying documents to our offices at 47 Bain Street, Wellington, between 08h30 and 16h30.

PLEASE NOTE:

- **YOUR APPLICATION WILL ONLY BE CONSIDERED IF THE ENTRY REQUIREMENTS ARE MET AND ALL THE REQUIRED DOCUMENTS ARE ATTACHED.**
- **NO FAXED APPLICATIONS WILL BE ACCEPTED.**
- **ONLY ORIGINAL DOCUMENTS WILL BE ACCEPTED UNLESS OTHERWISE AGREED.**
- **CEFA WILL NOTIFY SUCCESSFUL APPLICANTS WITHIN FOUR WEEKS OF THEIR APPLICATION AND DOCUMENTATION SUBMISSION.**

CEFA Disclaimer

All information in this Application document was correct at the time of going to press. Any changes in information, terms and conditions will be made to this document as soon as possible and every attempt will be made to notify anyone who needs to know of these changes without undue delay.