

Employer Name				
SDL number				
Application form included and signed off?	Yes		No	
Programmes selected part of list provided in Terms of Reference?	Yes		No	
Proof of accreditation and scope of training provider included?	Yes		No	
Proof of constituency of Employer included?	Yes		No	
Geographic spread included?	Yes		No	
Demographic spread included?	Yes		No	
Letter of commitment to employ at least 90% of the 18.2 learners that successfully complete the programme included?	Yes		No	
Proof of successful implementation and completion of previous learnership programmes?	Yes		No	
Valid original tax clearance certificate submitted?	Yes		No	
Do you agree compliance to the scope of work as per the Terms of reference?	Yes		No	
Do you confirm that you are familiar with the legislative framework as per the scope of work and that you will comply to it	Yes		No	
Do you confirm that you understand that the implementation of the programmes are subject to the signing of a management and delivery contract between your organisation and the W&RSETA	Yes		No	

I, (full names) _____ in my capacity as _____ (occupation) of _____ (organisation) hereby confirm that the abovementioned have been completed truthfully and accurately and I acknowledge that should it prove not to be the case, my organisation's submission will not be approved

Signature: _____

Date: _____