| W&RSETA EMPLOYER APPLICATION FORM**HOSTING OF LECTURERS** |
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|  |
| 1. **COMPANY INFORMATION**
 |
| Name of Employer/Company |  |
| Employer SDL Number |  |
| Employer Head Office Address |  |
| Name Of Company Contact |  |
| Position Of The Contact Person |  |
| Email Address of Company Contact |  |
| 1. **PROGRAMME DETAILS**
 |
| Programme Title |  |
| SAQA Code |  |
| OFO Code  |  |

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| 1. **NUMBER OF LECTURERS AND STORE INFORMATION FOR HOSTING OF LECTURERS**
 |
|  | Province | Name of HET | District | Number of Lectures | Name of Store | Physical Address of Store | Supervisor that will oversee the process |
| Name | Tel Number (W) | Tel Number (C) | Email Address |
| 1. |  |  |  |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |
| 1. **COACH / MENTOR INFORMATION PER HOSTING SITE**
 |
|  | Name of Store | Physical Address of Store | Coach / Mentor that will oversee the process |
| Name | Tel Number (W) | Tel Number (C) | Email Address |
| 1. |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| 3. |  |  |  |  |  |  |
| 4. |  |  |  |  |  |  |
| 1. **SELECTION OF HOSTING DATES**
 |
| Hosting Week | Tick against the appropriate Box | Number of Lecturers |
|  |  |  |
|  |  |  |
|  |  |  |
| 1. **HOST EMPLOYER SIGN OFF**
 |
| Name and Surname |  |
| Position |  |
| Signature |  |
| Date |  |

**Disclaimer:** W&RSETA respect your right to privacy and therefore aim to ensure that we comply with the legal requirement of the POPI Act which regulates the manner in which we collect, process, store, share and destroy any personal information which you have provided to us. Furthermore, it is specifically agreed that the W&RSETA will endeavor to take all reasonable precautions to ensure that any information provided, is only used for the purposes it has been provided.