



P O Box 26024, Arcadia, 0007
 AgriSETA House
 529 Belvedere Street, Arcadia, 0083
 Tel: (012) 301 5600
 Fax: (012) 325 1677
 Website: www.agriseta.co.za
 Email: info@agriseta.co.za

LEARNER INFORMATION FORM: INTERNSHIP – PROJECT REF:

Full Names													
Surname													
Initials													
ID number <i>(please attach certified copy of ID)</i>													
Race & Gender													
Disability													
Home Language													
Province													
Rural / Urban													
Municipality/District													
Physical Address													
Postal Address													
Tel/Cell Number													
E-mail address													
BASIC EDUCATION													
Name of last school attended													
Highest grade obtained <i>(e.g grade 12)</i>													
Year obtained													
CURRENT REGISTRATION (TERTIARY)													
Name of Learning Institution													
Qualification currently registered <i>(e.g. ND: Agric Crop Production)</i>													NQF Level

Level of Studies (e.g 1 st year)		Is this your final year?	
Start and End Date	01 January 2024 to 31 December 2024		
Awarded Bursary Amount		Type of learner/student	18.1 <input type="checkbox"/> 18.2 <input checked="" type="checkbox"/> x
Were your studies funded by Agriseta in the previous year?			
EMPLOYER DETAILS			
Name of Employer	Tshwane University of Technology		
Employer Type (please tick whichever is applicable)	Co-operative <input type="checkbox"/>	NGO <input type="checkbox"/>	NPO <input type="checkbox"/>
			Other (please specify) <input checked="" type="checkbox"/> Institution of higher learning
Employer category (please tick whichever is applicable)	AgriSETA Levy payer <input checked="" type="checkbox"/>		Non AgriSETA Levy Payer <input type="checkbox"/>
SDL Number	L	6	5
		0	7
		5	2
		0	0
		5	0
Employer size (please tick whichever is applicable)	Large <input checked="" type="checkbox"/>		Medium <input type="checkbox"/>
			Small <input type="checkbox"/>
CIPRO/Dept. Of Social Development Registration no.	Recognised by High Education Act		
Physical Address	Staatsartillerie Road, Pretoria West		
	0	0	0
		1	
Province	Gauteng		
Municipality: Local	Pretoria		District Pretoria
Contact person	M	R	D
			D
			X
	a	b	a
Tel number	0	1	2
	3	8	2
	4	6	3
	4		
Cell number	0	7	6
	7	0	2
	6	7	0
	7	1	5
E-mail address	Xabadd@tut.ac.za		

Signature of Learner _____

Date _____

Signature of Employer _____

Date _____