

Accreditation no: ACC/2014/00/160

Media, Information and Communication Technologies Sector Education and Training Authority





INTERNSHIP AGREEMENT

NB: PLEASE CHECK FOLLOWING PRIOR TO SUBMISSION

- Attach Certified true copy of learner ID.
- Attach Unemployed learner contract of employment.
- Attach Copy of the highest Qualification

Part A: INTERNSHIP DETAILS AND PARTIES TO AGREEMENT

SECTION 1

INTERNSHIP DETAILS

| 1.1 Title of Internship: | Software Developer | | |
|--|--------------------|--|--|
| 1.2 Commencement date of the Internship agreement: | 02-05-2018 | | |
| 1.3 Termination date of the Internship agreement: | 01-05-2019 | | |

SECTION 2

LEARNER DETAILS

| 2.1 Surname: | Sangqu | | | | | |
|--|---------------|--------|----------|-------|--|--|
| 2.2 Full Names: | Anam | | | | | |
| 2.3 Identity Number (RSA) Attach certified copy of ID: | 9301030459088 | | | | | |
| 2.3.1 Below 35 Years? (X) | | Х | No | NO | | |
| 2.4 Gender (X) | | MALE | × | х | | |
| 2.5 Equity (X) | x | INDIAN | COLOURED | WHITE | | |

| 2.6 Do you have a disability, as stipulated | by th | e Em | ployme | ent Ac | t 55 of | 19987 | ? (X) | YES | 5 X |
|--|--------|--|---------------------|--------|---------|--------|-------|--------|------------|
| If yes, please specify: | | | | | | | | 1 | |
| 2.7 Home Address: | | | 8 Post | | | | e Ad | dress |) |
| Balasi Location | | | | | | | | | |
| Bisho | | | | | | | | | |
| 2.9 Telephone / Cell: | | 07 | 36260 |)513 | | | | | |
| 2.10 Email: | | ana | amsar | ngqu@ | gmai | il.com | | | |
| 2.11 Are you South African Citizen? (X) |) | | | YES | | T | | X | |
| If No, please specify and attach documer status. (E.g. permanent residence, Asylum | | | its indicating your | | | | | | |
| 2.12 Highest level of highest Qual | lifica | ation | attai | ined | (X) | | | | |
| NQF Level | | Otl | ner | | | | | | |
| 8 | | Dod | toral | degre | es, Pl | nD | | | |
| 7 | | Masters degrees | | | | | | | |
| 6 | Х | | | | | | | | |
| 5 | | National diplomas + Higher certificate | | | | | | | |
| 4 Further Education and Training Certificate(FETC) | | Grade 12, Matric Exemption | | | | | | | |
| 3 | | Grade 11 | | | | | | | |
| 2 | | Grade 10 | | | | | | | |
| 1 General Education and Training Certificate(GETC) | | Grade 9, ABET Level 4 | | | | | | | |
| 2.13 Title of your highest qualification? | Nati | ional | Diploi | ma : I | nform | ation | Techr | nology | |
| 2.14 Have you previously undertaken a | Inter | nship | ? (X) | | | YES | T | X | |
| f yes, please specify: Title and nternship DoL Registration number | Title | | | | | | | | |
| .15 Were you employed by your employer efore concluding this agreement? (X) | | | EMPLOYED X | | | | | | |
| a) If unemployed, for how long? | | | | | | | | | - |
| b) If employed, when did you start vorking for your employer? | | С | С | у | у | m | m | d | d |

SECTION 3 PARENT OR GUARDIAN DETAILS

(To be completed if learner is a minor - i.e. unmarried person under 18 years)

| 3.1 Surname: | |
|-----------------------------|--|
| 3.2 Full Names: | |
| 3.3 Identity Number (RSA) : | |
| 3.4 Home Address: | 3.5 Postal Address: (If different from Home Address) |
| | |
| | |
| | |
| 3.6 Home Telephone: | |
| 3.7 Work Telephone: | |
| 3.8 Cell Phone: | |
| 3.9 E-mail Address : | |

SECTION 4 EMPLOYER DETAILS (Lead Employer)

| 4.1 Legal Name of Employer: | Little Pig CC | | |
|---|---|---|----|
| 4.2 Trading Name (if different from Legal Name): | | | |
| 4.3 Home Address: | 4.4 Postal Address: (If different from Home Address) | | |
| 11 William Avenue | | | |
| Vincent | | | |
| East London | | | |
| 4.5 Are you liable for the skills development levy? (X) | | х | NO |
| If yes, what is your SDL number | 780780583 | | |
| 4.6 Name of SETA with which you're registered | MICT SETA | | |
| 4.9 Are you acting as the lead Employer? | X NO | | |

| 4.10 Contact Person responsible for Internship: | Lulamisa Kama |
|---|-----------------------|
| 4.11 Work Telephone: | 043 726 2864 |
| 4.12 Work Fax: | 086 504 3042 |
| 4.13 E-mail Address: | lulamisa@littlepig.cc |

SECTION 5 HOST EMPLOYER

| 5.1 Legal Name of Employer: | | | |
|--|-------------------------------------|-----|--------|
| 5.2 Trading Name (if different from Legal Name): | | | |
| 5.3 Home Address: | 5.4 Postal Addres (If different fro | | dress) |
| | | | |
| 5.5 Are you liable for the skills developmen | t levy? (X) | YES | NO |
| If yes, what is your SDL number | | | |
| 5.6 Name of SETA with which you're registered | | | |
| 5.7 Are you acting as the Host Employer? | YES NO | | |
| 5.8 Contact Person responsible for Internship: | | | |
| 5.9 Work Telephone: | | | |
| 5.10 Work Fax: | | | |
| 5.11 E-mail Address: | | | |

SECTION 6 SIGNATORIES

| Learner's Signature: | Host Employer: |
|----------------------------|----------------------|
| A SAND | |
| Date: 20 April 2018 | Date: |
| Witness Signature: | Witness Signature: |
| Malmer | |
| Date: 20 April 2018 | Date: |
| | |
| Employer Signature: | |
| Harries | |
| Date: 20 April 2018 | |
| Witness Signature: | |
| M. Malya | |
| Date: 20 April 2018 | |
| MICT SE | TA OFFICIAL USE ONLY |
| LP ADMINISTRATOR | |
| LP MANAGER | |
| LP MANAGER | |
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