

Accreditation no: ACC/2014/00/160

Media, Information and Communication Technologies Sector Education and Training Authority



Accelerating quality skills towards an information savvy society

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:	Network Administrator
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:	Zoz	O			
2.2 Full Names:	Ntsi	ka			
2.3 Identity Number (RSA) Attach certified copy of ID :	9204295592082				
2.3.1 Below 35 Years? (X)	X NO				
2.4 Gender (X)	X FEMALE				E
2.5 Equity (X)	х	INDIAN	С	OLOURED	WHITE

2.6 Do you have a disability, as stipulated by the			yment	Act 55	5 of 19	998?	(X)		YES	X
If yes, please specify:										
2.7 Home Address:			2.8 Postal Address: (If different from Home Address)							
No.16 Prior Crescent Street Queegny Ea London 5201	st									
Bolotwa Admin Area Idutywa										
2.9 Telephone / Cell:		0782	3775	28						
2.10 Email:		ntsik	azozo	@gma	ail.co	m				
2.11 Are you South African Citizen? (X)			2	K				N	0	
If No, please specify and attach docum status. (E.g. permanent residence, Asylu			_	your					ICABL ACH	E
2.12 Highest level of highest Quali	ficat	tion a	ttair	ed (X	()					
NQF Level		Othe	er							
8		Doct	oral d	egree	s, Ph	D				
7		Masters degrees								
6	X	4 year degrees								
5		National diplomas + Higher certificate			icate					
4 Further Education and Training Certificate(FETC)		Grade 12, Matric Exemption								
3		Grad	e 11							
2		Grad	e 10							
1 General Education and Training Certificate(GETC)		Grade 9, ABET Level 4								
2.13 Title of your highest qualification?		ational Diploma : Information Technology ommunication Ne								
2.14 Have you previously undertaken a	4 Have you previously undertaken a Intern			rnship? (X) YES X						
If yes, please specify: Title and Internship DoL Registration number Dol		le								
		L Registration number								
2.15 Were you employed by your emplo before concluding this agreement? (X)	oyer EMPLOYED X									
(a) If unemployed, for how long?										
(b) If employed, when did you start		С	С	У	У	n	n 🔽	m	d	d

working for your employer?					

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 H	ome Add	lress)
11 William Avenue			
Vincent			
East London			
4.5 Are you liable for the skills development	levy? (X)	X	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 from		lress)
5.5 Are you liable for the skills development	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:
Date: 20 April 2018	Date:
Witness Signature:	Witness Signature:
No.	
14:5 Limeto	
Date: 20 April 2018	Date:
Employer Signature:	
(H)	
Here	
Date: 20 April 2018	
Witness Signature:	
M. M. Maya)	
Date: 20 April 2018	
	ICIAL USE ONLY
LP ADMINISTRATOR	
LP MANAGER	