

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:	IT Information Systems 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:	Mdlalana					
2.2 Full Names:	Andisiwe					
2.3 Identity Number (RSA) Attach certified copy of ID:	8904046136086					
2.3.1 Below 35 Years? (X)	X NO					
2.4 Gender (X)		Х		FEMALE		
2.5 Equity (X)	Х	INDIAN	С	OLOURED	WHITE	

2.6 Do you have a disability, as stipulated by	the (Employ	/ment	Act 55	of 199	98? (X)	YES	Х
If yes, please specify:									
2.7 Home Address:		2.8 Postal Address: (If different from Home Address)							
113 Smith Hill Rd									
Highway Gardens									
East London									
2.9 Telephone / Cell:		0710	25066	55					
2.10 Email:		andis	iwem	dlalar	na@gn	nail.co	om		
2.11 Are you South African Citizen? (X)			Х	(N	0	
If No, please specify and attach documents status. (E.g. permanent residence, Asylum s		s indicating your IF APPLICABL eeker, etc) ATTACH			E				
2.12 Highest level of highest Quali	fica	tion a	ttain	ed (X)				
NQF Level		Othe	:r						
8		Doctoral degrees, PhD							
7		Masters degrees							
6	X	4 year degrees					ļ		
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?	Fitle of your highest qualification? National Diploma : Information Technology (Support Servic								
.14 Have you previously undertaken a Internship? (X) YES X									
If yes, please specify: Title and	Title								
Internship DoL Registration number	DoL Registration number								
2.15 Were you employed by your employefore concluding this agreement? (X)									
(a) If unemployed, for how long?									
(b) If employed, when did you start working for your employer?		C	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)
A A A A A A A A	
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	ress)	
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	Г	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 Address: (If different from Home Address)			
5.5 Are you liable for the skills developmen	levy? (X)	YES	NO	
		120		
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:	3			
5.10 Work Fax:				
5.11 E-mail Address:		-		

SECTION 6 SIGNATORIES

Learner's Signature:	Host Employer:
J. Meth	
Date: 23 April 2018	Date:
Witness Signature:	Witness Signature:
Nemen	
Date: 23 April 2018	Date:
Employer Signature:	
Harris	
Date: 23 April 2018	
Witness Signature:	
M. Molyri	
Date: 23 April 2018	
7.00	ICIAL USE ONLY
LP ADMINISTRATOR	
LOMANACED	
LP MANAGER	

