

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:	Graphic Designer
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:	Godlo					
2.2 Full Names:	Nokonwaba					
2.3 Identity Number (RSA) <b>Attach</b> certified copy of <b>ID</b> :	9110091094084					
2.3.1 Below 35 Years? (X)	X NO					
2.4 Gender (X)	MALE X					
2.5 Equity <b>(X)</b>	х	INDIAN	С	OLOURED	WHITE	

2.6 Do you have a disability, as stipulated by	Emplo	yment	Act 55	of 19	98? (	X)	Y	/ES	х	
If yes, please specify:										
2.7 Home Address:			2.8 Postal Address: (If different from Home Address)							
41 naidoo st,Kamvelihle,port elizabeth										
Matyeba administrative area										
2.9 Telephone / Cell:		0730793695								
2.10 Email:		nokonwabagodlo@gmail.com								
2.11 Are you South African Citizen? (X)			YE	S				X		
<b>If No,</b> please specify and <b>attach</b> docum status. (E.g. permanent residence, Asylu										
2.12 Highest level of highest Quali	ficat	tion a	ttain	ed (X	<b>()</b>					
NQF Level		Other								
8		Doct	oral de	egree	s, PhD	)				
7		Mast	ers de	grees	ı					
6	X	4 year degrees								
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?		cional Diploma : National Diploma in ormation technol								
2.14 Have you previously undertaken a	Inter	ernship? (X) YES X				Х				
If yes, please specify: Title and	Title									
Internship DoL Registration number	Dol	DoL Registration number								
2.15 Were you employed by your emplo before concluding this agreement? <b>(X)</b>	yer	EMPLOYED X								
(a) If unemployed, for how long?										
(b) If employed, when did you start working 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)

3.5 Postal Address: (If different from Home 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 Add	dress)
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:
<b>Date:</b> 20 April 2018	Date:
Witness Signature:	Witness Signature:
NETO	
<b>Date:</b> 20 April 2018	Date:
Employer Signature:	
Harrie	
<b>Date:</b> 20 April 2018	
Witness Signature:	
W. Malya	
<b>Date:</b> 20 April 2018	
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LP ADMINISTRATOR	
LP MANAGER	