

ASSIGNMENT COVER

NB: PLEASE PRINT	- USE A BLACK PEN		
Name of Course	Professional Project Execution & Closure Management		
Dates of Training:	24-28		
Unit Standard ID:	243812; 243819		
Learner ID Number:	9405115343081		
Surname:	Mkhwanazi.		
First Name(s):	imisele		
(Surname and name(s) as they appear in your ID book)			

I, the above-named and undersigned, declare that the assignment / project / task containing the above stated headings has been compiled by me and is authentically the product of my own work as proof of my competency in the above stated unit standards.

Signature:		
Date:	15 June 2020	

NB This is the assignment cover which must be completed and must be submitted with the assignment.

Cell No.:			
Cell No.:	065 88 50 139		
E-mail address:			
L man address.	Zimiselemkhwawaai 2@gmail.com	:	

Experiential Log

INS	TRU	CT	10	N:

Full name of candidate:

This log must be completed by yourself and your mentor / supervisor as you gain workplace experience / when getting mentoring assistance.

ID number of	candidate:	9405115343081			
Full name of			ande		
Place of emp	ioyinent.	JOB selby		2	
	Hours		Signature		
Date	worked	Description of tasks / mentoring	Candidate	Mentor / Supervisor	
03/02/202	2 Lour	Went Graugh KhE	The ai.	The D	
		project and the execution	>		
		phase.			
57/02/202	o 1 hour	We validated and	dille ai.	The	
		verified the project			
7		tasks.			
8/02/2020	20 minutes	WE checked if the	alle ai.	Admed	
		resources are still			
1		US able for the next proje	1	- 1 A	
20/02/2020	50 minutes	Communicated Project	Till soi.	John	
		execution phase to the			
, ,		stakeholders.	e u M		
1/02/2020	1 hour	We discussed the	Allera:	Than)	
E		changes in a project will			
. / /	.1	be controlled.	- H II		
6/63/2020	1 hour	Lommunoicated the	Gillian .	8de	
		to changes in a			
112-2-	11	project. Deal with the issues	-and	Oh I	
105/2020	1 hour		1		
		is on the execution drass			
0/05/2020				nde-	
0,00,202		We determined all the resources that have to	Allluma a:	U C	
		Les Compositions		I s	

	Hours	Hours worked Description of tasks / mentoring	Signature		
Date			Candidate	Mentor / Supervisor	
01/06/2020	30 minutes	WE compled the projet	Allumai.	,	
/ /	1	Report.	,		
	1.	,	1!		
15/06/2020	Shows	WE discussed the	all was	and and	
		planning and outcomes			
		of the projects			
				8.	
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	a				
	*				
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		× 1	is .		
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19					
			8		
		- AND -			
- 44.00	 				

CERTIFICATION OF THE READINESS OF CANDIDATE / LEARNER TO BE ASSESSED

The candidate / learner has been trained in the outcomes and criteria of this learning programme and is ready to be assessed. Evidence have been prepared and will be available during assessment.

Signed by mentor / supervisor:	THE STATE	Date:	15 June 2020
Signed by candidate / learner:	##	Date:	15 Sune 2020

Learner Name & Surname: Zimisele Managazi ID Number: 940511534308)

Mentor's Name & Surname: Thulaws Name & Odinards

Mentoring Sessions Log Sheet Five

Project Man	agement : Monitor, Control Execu	tion & Project Closure Management
Date	0	
Key points discussed		Action plan
* Execut	tions a project.	In an execution place we went through the controlling the project and checked if the issues were controlled in a good manner. Solved all the risks that occured,
Signed:	Mentor Film	Learner
Date		
Key points	discussed	Action plan
Project	o closure and notions.	*Compiled a hand over of functions.
		* WE also compiled a project reports and the about the performance and the progress of the project.
Signed:	Mentor	Learner