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Polokwane Campus

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Limpopo Chefs Academy

SPI – STUDENT PERSONAL INFORMATION FORM

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STUDENT EMAIL ADDRESS	youngraedod 7, 5k @gmail.com
COURSE STUDYING	Chef
	MEDICAL CONDITIONS
IF YOU HAVE ANY MEDICAL CONDITIONS THAT WE NEED TO KNOW OF PLEASE RECORD	
-	OPY OF YOUR MEDICAL INSURANCE OR MEDICAL AID
CARD FOR EMERGENCIES.	
M/A	
EMERGENCY TELEPHONE NUMBER (PLEASE SUPPLY 2 NUMBERS)	
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1290000717427470	of the following to the control of t
PARENT/GUARDIAN DETAILS	
NAME & SURNAME OF	-
FATHER/GUARDIAN	Thapelo kepaletswe
NAME & SURNAME OF	
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