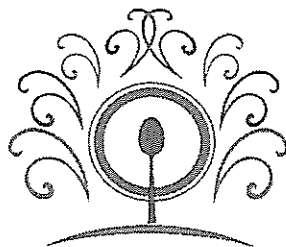


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## Limpopo Chefs Academy

### SPI – STUDENT PERSONAL INFORMATION FORM

STUDENT NAME	PHELETSO
STUDENT SURNAME	MATJILA
STUDENT ID NUMBER	0111140730081
STUDENT CELLPHONE NUMBER	083 588 8039
STUDENT EMAIL ADDRESS	Pheletsomatjila@gmail.com
COURSE STUDYING	Chef
<b>MEDICAL CONDITIONS</b>	
IF YOU HAVE ANY MEDICAL CONDITIONS THAT WE NEED TO KNOW OF PLEASE RECORD THEM BELOW. WE REQUIRE A COPY OF YOUR MEDICAL INSURANCE OR MEDICAL AID CARD FOR EMERGENCIES.	
Short-term breath.	
EMERGENCY TELEPHONE NUMBER (PLEASE SUPPLY 2 NUMBERS)	
Father - Lucas 083 239 2065 Mother - Portia 073 870 4386	
<b>PARENT/GUARDIAN DETAILS</b>	
NAME & SURNAME OF FATHER/GUARDIAN	LUCAS SECEPE MATJILA
NAME & SURNAME OF MOTHER/GUARDIAN	PORTIA MATSHIDISO MATJILA
TELEPHONE NUMBER FATHER/GUARDIAN	083 239 2065
TELEPHONE NUMBER MOTHER/GUARDIAN	073 870 4386
EMAIL ADDRESS FATHER/GUARDIAN	N/A
EMAIL ADDRESS MOTHER/GUARDIAN	Tshidimatjila96@gmail.com
HOME ADDRESS FATHER/GUARDIAN	HARTSWATER 17 ANDERSON STR
HOME ADDRESS MOTHER/GUARDIAN	HARTSWATER 17 ANDERSON STR



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