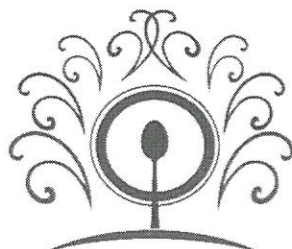


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info@limpopocheffs.co.za
City & Guilds Centre No: 848490



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Limpopo Cheffs Academy

SPI – STUDENT PERSONAL INFORMATION FORM

STUDENT NAME	POELETSO
STUDENT SURNAME	THABA
STUDENT ID NUMBER	9909250444083
STUDENT CELLPHONE NUMBER	066 433 5956
STUDENT EMAIL ADDRESS	thabapoeletso@gmail.com
COURSE STUDYING	Grander Chef

MEDICAL CONDITIONS

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.

EMERGENCY TELEPHONE NUMBER (PLEASE SUPPLY 2 NUMBERS)

PARENT/GUARDIAN DETAILS

NAME & SURNAME OF FATHER/GUARDIAN	Morwammatsiabana Simon Thaba
NAME & SURNAME OF MOTHER/GUARDIAN	Mahlagalehu Jeanet Thaba
TELEPHONE NUMBER FATHER/GUARDIAN	079 2958 934
TELEPHONE NUMBER MOTHER/GUARDIAN	072 439 6871
EMAIL ADDRESS FATHER/GUARDIAN	Morwammatsiabana@thaba@gmail
EMAIL ADDRESS MOTHER/GUARDIAN	thabajeane@gmail.com
HOME ADDRESS FATHER/GUARDIAN	319 Makotse Village
HOME ADDRESS MOTHER/GUARDIAN	319 Makotse Village



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