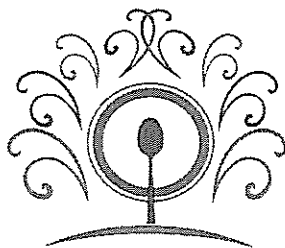


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City & Guilds Centre No: 848490



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Limpopo Chefs Academy

SPI – STUDENT PERSONAL INFORMATION FORM

STUDENT NAME	MMAKSA A NEO
STUDENT SURNAME	RAMOHLALE
STUDENT ID NUMBER	0106210379082
STUDENT CELLPHONE NUMBER	079 6887464
STUDENT EMAIL ADDRESS	neomologadi21@gmail.com
COURSE STUDYING	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.	
Sinus	
EMERGENCY TELEPHONE NUMBER (PLEASE SUPPLY 2 NUMBERS)	
073 003 7454 (mom) 0722770728 (Dad)	
PARENT/GUARDIAN DETAILS	
NAME & SURNAME OF FATHER/GUARDIAN	MALETSOAI PAUL RAMOHLALE
NAME & SURNAME OF MOTHER/GUARDIAN	MOKSADI RAMOHLALE
TELEPHONE NUMBER FATHER/GUARDIAN	0722770728
TELEPHONE NUMBER MOTHER/GUARDIAN	0730037454
EMAIL ADDRESS FATHER/GUARDIAN	Paulneo@vodamail.co.za
EMAIL ADDRESS MOTHER/GUARDIAN	MRamohlale@judiciary.org.za
HOME ADDRESS FATHER/GUARDIAN	91 Pietersburg Str, Annadale #10
HOME ADDRESS MOTHER/GUARDIAN	91 Pietersburg Str, Annadale #10



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