



KWAZULU-NATAL PROVINCE

PUBLIC WORKS
REPUBLIC OF SOUTH AFRICA

DATABASE OF GRADUATES AND STUDENTS WITH BUILT ENVIRONMENT QUALIFICATIONS

REFERENCE NUMBER: _____

Please print when completing this form. Mark appropriate blocks with an "X"

PERSONAL PARTICULARS

FULL NAMES: _____ SURNAME: _____

IDENTITY NUMBER: _____ DATE OF BIRTH: _____

PHYSICAL ADDRESS

WARD NUMBER

DISTRICT MUNICIPALITY _____

Are you interested in the Internship or the In-service training Programme? **Please indicate** →

CELL PHONE NUMBER: _____

ALTERNATE CONTACT NUMBER:

NATIONALITY: **South African/Other**

GENDER: **Male/female**

DISABILITY: **YES/NO**

Please specify _____

RACE: **Black/Coloured/Indian/ White**

Have you ever been convicted of a criminal offence, dismissed from employment or requested to resign? **YES/NO**

Name of Qualification:

Name of Tertiary Institution:

Date completed studies:

Have you benefited from any other Internship/In-service training Programme **Yes/No**

DECLARATION

I confirm that the above particulars are complete and correct

SIGNATURE OF GRADUATE/STUDENT

DATE

WITNESS