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- 1. Complete the areas on the form in Block letters in black/ blue ink.
- 2. A non-refundable application fee of N\$80.00 must accompany this application. Please do not send cash if posted. Payments can be made in cash at the Centre through Finance office, or by Electronic Fund Transfer (EFT) and enclose the original proof of payment. No bank cash deposit.
- 3. This application must be accompanied by certified copies of ID/Full birth certificate, school leaving certificates, academic qualifications/ statement of results. Please do not send original documents.
- Completed application forms can be submitted at Eenhana VTC or mailed to Eenhana VTC, P O Box 13434: Eenhana
- 5. The due date for application is 31 October 2024

Attach recent passport photo here

							APPLI	CANT	'S PARTICI	JLARS (I	Mark	in th	e app	propriate box with an 🔀
Title:	Mr Ms													
Surname:														
First Name(s):									Middle N	ame (s):				
Date of Birth:	Υ	Υ	Υ	Υ	М	М	D	D	Gender:	М		F		Identity Number:
Contact Number:			•						•					Nationality:
Marital Status:			Single)					Married					
Postal Address:														<u> </u>
Residential Addres	SS:													
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Full Name:														Cell Number:
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Town or Village:														
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Occupational area	a.													and Physical Science, when applying for Technical
Grade 11/12 Certifi when applying fo	icate r Tec	e (NSS chnica	SCO/II al Occi	GCSE) upatio	20 Po nal ar	ints ir ea.	n 6 sul	bjects	, with an I	symbo	ol in	Mat	hem	atics, English and Physical Science/Physics/Chemistry
Grade 11 Certificate (l applying for Technica					itional f	ield, 18	3 points	s in 6 s	ubjects, wit	h an F sy	mbo	ol in N	lath e	matics, English and Physical Science/Physics/Chemistry, when
Grade 11/12 Certificat Operations & Inform							cts, wit	h an F	symbols in	English aı	nd M	1athei	matic	s, when applying for Facility Maintenance, Wholesale & Retail
	ıl Cert	tificate	e in Bri	icklayir	ng and	Plaste	ring/P	lumbii	ng and Pipe	Fitting/	Carp	entry		ction Management) Level 5 ery and Cabined Making at NQF Level 4 or equivalent

CAREER CHOICE

Choose in order of preference, the Occupational areas you are applying for: put a number in the box in order of preference e.g., First choice write 1 and second choice write 2.

QUALIFICATIONS	Level 1	Level 2	Level 3	Level 4	Level 5	Committee Approval - Official Use Only (Please, do not write in this space)
National Vocational Certificate in Automotive Engineering Foundation (Vehicle Collision Repair and Spray-Painting)						
National Vocational Certificate in Bricklaying & Plastering						
National Vocational Diploma in Civil and Building Services Engineering (Building and Civil Construction Management) (Blended Learning)						
National Vocational Certificate in Facility and Maintenance						
National Vocational Certificate in Information, Communication and Technology						
National Vocational Certificate in Plumbing and Pipefitting (Blended Learning at L4)						
National Vocational Certificate in Metal Fabrication (Boiler Making)						
National Vocational Certificate in Metal Fabrication (Welding)						
National Vocational Certificate in Wholesale and Retail Operations (Blended Learning)						
TER	TIARY ED	UCATION				
Institution:						
Address:					Region:	
Phone: Email Address:	ND A DV E	DUGATIO			Year of Ex	amination:
Highest Grade passed:	NDARY E	DUCATIO	V			
Name of the School:			Towr):		
Region:						
SUBJECTS OF T	HE HIGH	EST GRAD	E PASSE	.D		
Subjects Examination Ty	ре		Grade:	s/Symbol:	3	
WORKING	VDEDIEN	OF /I6	. D la I . V			
WORKING E. Employer:	XPERIEN	CE (IT app	olicable)			
Employer address:						
Phone:			Fax:			
Town:			Region	า:		
Position held:			Durati	on:		
E-mail Address:						
FINANCIAL ASSISTANCE (Mark in t	he appro		x with ar	'X)	
Do you need financial assistance?			Yes			No
HEALTH PARTICULARS (N	/lark in tl	he approp	riate bo	with an	Ά.	
Do you have any Disability or sensory impairment?			Yes			No
If yes, state the nature of your disability/ impairment. (If possible, attach a	copy of n	nedical repo	ort)			

Based on your disability/ impairment, do you have any speci	an need/s? (Please specify)			
Do you suffer from any chronic disease/s?		Yes	No	
If yes, please specify. (If possible, attach a copy of medical	report)	' '		
	PERSONAL PROTECTIVE EQUIP	MENT		
Shoe size: Overall size:	Shirt size:	Skirt/Trouser	size:	
	DECLARATION			
l hereby confirm that all the information provided is authentic. Any false information will lead to my a	· · · · · · · · · · · · · · · · · · ·	e, and that all th	e attached supporting do	cuments æ
Signature of the applicant:			Date:	

BANKING DETAILS:

Eenhana VTC First National Bank Account Number: 62244479318 Business Standard Call Account Branch Code: 281773 Reference: Applicant's full name

APPLICATION FOR HOSTEL ACCOMMODATION

Eenhana Vocational Training Centre has limited space for accommodation. Admission to the Centre does not necessarily guarantee hostel accommodation. Take Note: This is a self-catering hostel.

	APPLICANT'S PARTICULARS										
Title Mr Ms											
Surname:											
First Name(s):	Mido	dle Name:									
Date of birth: Y Y Y Y M M D D	Gender:	М	F	Cell/Tel No):						
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Marital Status: Single			Marrie	d							
Postal Address:				l l							
Residential Address:											
Town/Village											
Region:											
Email Address:											
	EMERGENC'	Y CONTACT	PERSON								
Full Name:											
Relationship:											
Home Address (Town /Village)		[Region:								
Tel. No:			Cell. No:								
Email Address:											
	DE	CLARATION									
I hereby confirm that all the information probeing considered. Signature of applicant:		or or my known	eage. 7 my								
Signature of applicant:					Date						
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Semester	Yea	ar									
Candidate No	Occ	cupational a	rea & Leve	el							
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