

# Application Form



**BRAIN-JAR**  
SKILLS DEVELOPMENT

## SECTION 1: INSTRUCTIONS

1. Complete the application form and attach certified copies of your ID and qualifications.
2. Pay the R250 non-refundable application fee. Important: Use your ID number as reference when making a payment. Payment must only be made into BRAIN-JAR's bank account. No cash will be accepted by BRAIN-JAR or its representatives.
3. Submit the completed application form, certified documents and proof of payment of application fee to BRAIN-JAR Administration Department per Email: [apply@brainjarskillsdev.co.za](mailto:apply@brainjarskillsdev.co.za)
4. BRAIN-JAR will notify you once your completed application has been received.
5. BRAIN-JAR will notify you if your application was successful and issue you with an Acceptance Letter (GEN-003) which must be completed, signed and returned to BRAIN-JAR.
6. The registration fee due must be paid before the last payment dates specified in the Acceptance Letter (GEN-003).
7. You will be registered at BRAIN-JAR upon receipt of your signed Acceptance Letter and proof of payment of the registration fee.

## SECTION 2: SELECT THE PROGRAMME APPLYING FOR

NQF level 5 ECD - National Diploma: Early Childhood Development - Paradise Institution

NQF level 4 ECD - Occupational Certificate: Early Childhood Development Practitioner

Excel

Word

## SECTION 3: PERSONAL DETAILS

Surname:  Title:

First Names:

ID Number:  Date of Birth:

Gender:  Male  Female  Race: African  Indian  Coloured  White

Home Language:

## SECTION 4: CONTACT DETAILS

Residential Address:  Postal Code:

Province:  Nearest Town:

Postal Address:  Postal Code:

Delivery Address during the day:  Postal Code:

Cell Number:  Email address:

Home Tel. No:  Work Tel. No:

## SECTION 5: EMPLOYMENT DETAILS

Name of Employer:  Province:

Your Position:  Work Tel. No:

Employment Status: Full Time  Part Time

Address of Employer:  Postal Code:

