

Learnership Registration Validation Form



Learner Name		Employer Name	
Learner Number		Learnership Number	
Contract Date			

Section One

A	1.1 – 1.4	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
B	1.1	Entry requirements for qualification met (see 2.13)	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Section Two

A	2.1 – 2.7	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
B	2.10 – 2.16	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Section Three

A	2.3	If learner under 21 years 3.1 – 3.3 must be completed	Applicable	<input type="checkbox"/>	N/A	<input type="checkbox"/>
B	3.1 – 3.3	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Section Four

A	4.1 – 4.4	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
B	4.6	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
C	4.7, 4.8, 4.9	One of these completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
D	4.10	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Section Five

A	5.1 – 5.4	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
B	5.6	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
C	5.7, 5.8, 5.9	One of these completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
D	5.10	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Section Six

A	6.1	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
B	6.2	be completed in 2.16 is answered 'NO'	Applicable	<input type="checkbox"/>	N/A	<input type="checkbox"/>

Section Seven

A	7.1	Completed in full	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
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|---|-----------|------------------------------------------------------|------------|--------------------------|-----|--------------------------|
| B | 7.2 | To be completed in 2.3 indicates age of less than 21 | Applicable | <input type="checkbox"/> | N/A | <input type="checkbox"/> |
| C | 7.3 – 7.8 | Completed in full | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

Administration

- | | | | | | |
|---|----------------------------|-----|--------------------------|----|--------------------------|
| A | Decision – Contract Valid? | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| B | Reason if stated No above | | | | |

Validation Conducted By:

Name	Date
Signature	

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