

SUNDUMBILI MAGISTRATE OFFICE: ADDITIONAL ACCOMMODATION

CIDB B.U.I.L.D FORMS

	B.U.I.L.D: DATA
	Section A: Employer Information
cidb Employer Number	
Employer Name	
Employer Name	
	Section B: Contract Data
cidb Contract Number	
Contract Title	
Name of contractor	
cidb Contractor Registration (CRS)	
	Section C: Best Practice Project Fee
Award Value (Including VAT) R	.00
Cla	ass of Works
Best Practic	e Project Fee (%) 0.2%
Best Practice Proje	ect Fee R · 0 0
Section D: Compliance with	Standard for Developing Skills Through Infrastructure Contracts
Award Value (Including VAT) R	.00
· · · · ·	ass of Works
Minimum Target Contract Skills Deve	<u> </u>
Target Contract Skills Developmer	
Section E:	Compliance with Standard for Indirect Targeting
Award Value (including VAT) R	.00
Cla	ass of Works
Minimum Indirect Targeting Enterprise	Development (%) 5%
Indirect Targeting Enterprise Develop	
	Contact Details; Employer's Accounting Officer
Name of Accounting Officer Tit	
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C mai	
Mobili	
Office Telephon	
	n G: Declaration; Employer's Representative
Name of Representative Ti	tle Initials Surname
Designation	
e-mail	
Mobile	0
Office Telephone	0
Date	VIVIVIVI - MIM = DD
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I, the undersigned warrant that:	
I am duly authorised to submit this not The products of this position are within a	tice on behalt of the Employer my personal knowledge, and are to the best of my belief both true and correct.
The contents of this notice are within the	my personal knowledge, and are to the best of my belief both true and contest.
Signature	
Date completed	Y Y Y Y - M M - D D
Date completed_	
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Please add any notes / comments as ap	ppiicable:
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cidb B.U.I.L.D PROGRAMME; STANDARD FOR INDIRECT TARGETING To be completed for each qualifying enterprise cidb Employer Number **Employer Name** cidb Contractor Registration Number of main / lead contractor Name of contractor cidb Contractor Registration Number of Joint Venture Partner 1 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 2 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 3 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 4 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 5 Name of contractor /Joint Venture Contact Person Title Initials Surname Designation e-mail Mobile 0 Office Telephone 0 cidb Contract Number Contract Title Contract Amount at Award(excluding VAT, including variations and any price adjustment)

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Targeted JV partner	-	or	Targ	eted	sub-c	contra	ctor]							
cidb Contractor Registration									1							
Name of contractor																
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Designation																
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Office Telephone				- [-								
a) Final value of qualifying work unde	ertake	n by T	arget	ted E	nterp	rise (e	excl.	VAT	incl.	varia	tions	and p	orice	adjus	stmer	nts):
R]].00
b) Contract amount at award of	main/	lead c	ontra	ct (ex	xcl. V	AT, in	icl. v	ariati	ons a	nd pr	ice a	djustr	nents	s): _		
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Was a	proje	ct spe	cific d	devel	opme	nt pro	ogran	n witl	h mile	estone	es de	velop	ed?	(Y/N)]
Was a schedule of	f activ	ities d	evelo	ped 1	to add	iress	the i	denti	fied d	levelo	pmei	nt are	as?	(Y/N)] :
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Name of Co-ordinato Designation ID / Passpor e-mai Mobile Office Telephone	t O	e on be	ehalf o	In	itials[l l	d Cc] -] -	Surr	JV; ar	nd	of both	n true] 	COTTE	ect
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Section F: Declara	tion;	Qua	lifyin	g Dev	relop	ing E	nterp	rise	Rep	resei	ıtativ	е		1.4	
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I / we appeal the assessment by the E	nterp	ise C	Devel	opme	nt Co	-ordin	ator	4	N						
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Signature															
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Cidb B.U.I.L.D PROGRAMME; STANDARD FOR INDIRECT TARGETING APPEAL FOR REVIEW OF ASSESSMENT OF ENTERPRISE DEVELOPMENT SUPPORT Section A: Employer Information Cidb Employer Number Employer Name Section B: Contract Data Cidb Contract Number Employer's contract number Contract Title Date of application for appeal Y Y Y Y - M M - D D Section C: Main Contractor / JV Information Cidb Contractor Registration Number of main / lead contractor Name of contractor / Joint Venture Section D: Qualifying Developing Enterprise cidb Contractor Registration

	Section E: Declaration
(* Delete which is not applicable) The contents of this notice are with	notice to the cidb on behalf of the Developing Enterprise / Employer * nin my personal knowledge, and are to the best of my belief both true and correct e such enquiries as necessary to verify the information contained on this form
Signature	
Name (please print)	
Position	
Date completed	Y Y Y Y - M M - D D
	Section F: cidb Official Use Only
cidb Contract Number	
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	PROGRAMME; STANDARD FOR INDIRECT TARGETING FARGETED ENTERPRISE DECLARATION be completed for each targeted enterprise
	Section A: Employer Information
cidb Employer Number	r l
Employer Name	
	Section B: Contract Data
cidb Contract Number	r I
Contract Title	
4	
Date of Practical Completion	Y Y Y Y W M D D
Contract Amount at Award(Inclus	SIVE OF VAT)
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Section	ion C: Main/Lead Contractor / JV Information
cidb Contractor Registration Number	,
of main / lead contractor	
Name of contractor	
cidb Contractor Registration Number of Joint Venture Partner 2	
Name of contractor /Joint Venture	
cidb Contractor Registration Number of Joint Venture Partner 3	
Name of contractor /Joint Venture	·
cidb Contractor Registration Number	
of Joint Venture Partner 4	
Name of contractor /Joint Venture	
cidb Contractor Registration Number of Joint Venture Partner 5	
Name of contractor /Joint Venture	
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Mobile	
Office Telephone	e O - - - -
St. Black III St.	ection D: Targeted Enterprise Information
JV partner	<u> </u>
cidb Contractor Registration	1
Name of contractor	r
Contact Person	n Title Initials Surname
Designation	n
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Mobile	e 0 -
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Number of full time employees	
	iolding by cidb Registered Contractors (Targeted Enterprise)
	cidb registration Equity (%)
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e-mail												<u> </u>				
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	Si	ection F: Con	tratel Par	ile hai	ion Goal	(0)P(0) for	Taro	eted	Ente	rpris			13.5	manus (ANVILLA A Antonio)	
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Section G:	Declaration; Enterprise Development Co-ordinator
Name of Co-ordinator	Title Initials Surname
Designation	
ID / Passport	
e-mail	
Mobile	0
Office Telephone	0
I, the undersigned warrant that: I am duly authorised to submit this nother the contents of this notice are within	otice on behalf of the Main/Lead Contractor / JV; and n my personal knowledge, and are to the best of my belief both true and correct
Signature	
Date completed	Y Y Y Y - 1/1 M - D D
Section H.	Declaration; Targeted Enterprise Representative
Name of Representative	Title Initials Surname
Name of Representative Designation	
Designation	
Designation ID / Passport	
Designation ID / Passport	
Designation ID / Passport e-mail	
Designation ID / Passport e-mail Mobile	0
Designation ID / Passport e-mail Mobile Office Telephone	o
Designation ID / Passport e-mail Mobile Office Telephone I / we agree disagree I / we appeal the assessment by the El I, the undersigned warrant that: • I am duly authorised to submit this n	o
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Section	on I: Declaration; Employer's Representative
Name of Representative	Title Initials Surname
Designation	
ID / Passport	
e-mail	
Mobile	0
Office Telephone	0
I / we agree disagree	with the Enterprise Development Co-ordinator's assessment of compliance with the Enterprise Development support provided
 I, the undersigned warrant that: I am duly authorised to submit this no The contents of this notice are within 	otice on behalf of the Employer n my personal knowledge, and are to the best of my belief both true and correct
Signature	
Date completed	Y Y Y Y . M M . D D

cidb B.U.I.L.D PROGRAMME; STANDARD FOR INDIRECT TARGETING PROJECT INTERIM REPORT tion A: Employer Information cidb Employer Number **Employer Name** cidb Contractor Registration Number of main / lead contractor Name of contractor cidb Contractor Registration Number of Joint Venture Partner 1 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 2 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 3 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 4 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 5 Name of contractor /Joint Venture Initials Surname Contact Person Title Designation e-mail Mobile 0 Office Telephone cidb Contract Number Contract Title Contract Amount at Award(Inclusive of VAT) Development Area 1: Provide information on the milestones achieved as the development plan for the reporting period. (Attach development plan)

(Attach development plan)

Development Area 2:
Provide information on the milestones achieved as the development plan for the reporting period.
(Attach development plan)

Section E: Compliance with the CIDB Star	ıdard	for India Targete				nter	orise	Deve	lopn	ent (Com	plete	one p	er
Targeted JV partner		or Targ	eted	sub-c	ontractor]		(Ple	ase t	tick)			
cidb Contractor Registration														
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e-mail								Щ						\Box
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Mobile	0		-] -								- 1
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 a) Current value of work complete 	ed by	Targeted	Ente	erprise	e (excl.VA	T, ind	d. var	riation	s and	l any	price	adju	stment):
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b) Contract amount awarded to Ta	argete	ed Enterp	rise	(excl.	VAT, inc	l. var	iation	s and	any	orice	adjus	tmen	ıt):	- 1
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Contract participation for targeted e	nterp	rise a/b a	bove	x 100) =(%)					%		_		- 1
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Was a schedule of ac	ctivitie	es develo	ped t	to add	ress the	identi	fied d	evelo	pmer	nt are	as? (Y/N)		- 1
		Are	appro	opriate	resourc	es all	ocate	d for o	devel	opme	ent? (Y/N)		
		Аге	the a	agree	d develop	ment	targe	ets bei	ing a	chiev	ed? (Y/N)		
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ID / Passport						<u>L.</u>								<u></u>
e-mail														⊒ I
Mobile	0		-] -]			
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Signature Date completed	Y	Y X	15.9		M W] :=:	D)	D						

Section G: I	claration; Targete	d Enterprise Repr	resentative	
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e-mail				
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Office Telephone	0 -	-		
I / we agree disagree	with the Enterpr	rise Development s		nent of compliance
I / we appeal the assessment by the E	erprise Developmen	it Co-ordinator 🕎	3	
I, the undersigned warrant that: I am duly authorised to submit this The contents of this notice are with Signature	otice on behalf of the my personal knowle	e Targeted Developedge, and are to the	oing Enterprise e best of my belief bo	th true and correct
Date completed Section	t: Declaration; Em	M M ployer's Represer	D D	
Section		ployer's Represer	ntative	
Section Name of Representative		ployer's Represer	ntative	
Section Name of Representative Designation		ployer's Represer	ntative	
Section Name of Representative Designation ID / Passport		ployer's Represer	ntative	
Section Name of Representative Designation ID / Passport		ployer's Represer	ntative	
Name of Representative Designation ID / Passport e-mai	itle Ini	ployer's Represer	Surname	
Name of Representative Designation ID / Passport e-mai	itle Ini	ployer's Represer	Surname Surname Co-ordinator's assessm	nent of compliance
Name of Representative Designation ID / Passport e-mai Mobile Office Telephone	itle Ini	tials	Surname Surname Co-ordinator's assessment provided	
Name of Representative Designation ID / Passport e-mai Mobile Office Telephone I / we agree disagree I, the undersigned warrant that: • I am duly authorised to submit this	itle Ini	tials	Surname Surname Co-ordinator's assessment provided	
Name of Representative Designation ID / Passport e-mai Mobile Office Telephone I / we agree I, the undersigned warrant that: I am duly authorised to submit this The contents of this notice are with	itle Ini	tials	Surname Surname Co-ordinator's assessment provided	

<u>(*)</u>

cidb PROJECT ASSESSMENT SCHEME: STANDARD FOR DEVELOPING SKILLS PROJECT COMPLETION REPORT Section A: Employer Information cidb Employer Number **Employer Name** Section B: Contractor / JV Information cidb Contractor Registration Number of main / lead contractor Name of contractor cidb Contractor Registration Number of Joint Venture Partner 2 Name of contractor /Joint Venture cidb Contractor Registration Number of Joint Venture Partner 3 Name of contractor Hoint Venture cidb Contractor Registration Number of Joint Venture Partner 4 Name of contractor /Joint Venture Surname Contact Person Title Initials Designation e-mail Mobile 0 Office Telephone Section C: Contract Data cidb Contract Number Contract Title 00. Tender Value at Award (excl. VAT) R Section D: Compliance with Contract Skills Development Goal (CSDG) Tender Sub-total (excl. VAT) R Class of Works Minimum Target Contract Skills Development Goal (%) 0 • Target Contract Skills Development Goal .00 Contract Skills Development Goal Achieved R Target Contract Skills Development Goal achieved (%) Section E: Construction Skills Development Goal Training Achieved Contract Skills No. Duration Development Goal No. Employed Training Method (Months) Unemployed (%) Method 1 (Skills Programme) Method 2 (TVET & Apprentice) Method 3 (P1& P2) Method 4 (Candidacy) Total (%)

Section F: Actual Training Records (Complete One per beneficiary or attach pdf copy of signed Form A5 Final Training Report)
Beneficiary Initials Surname
ID
Gender M F
Ethinic Group A I C W Other
Period of Engagement in Project From Y Y Y Y M M - D
To Y Y Y Y - IV W - D D
Training Method M1 M2 M3 M4
Employed Unemployed
Employer (where applicable)
Section F(i) Complete for a Professional Service Contract only (one per beneficiary)
Total hours
Beneficiary Initials Surname
ID
Gender M F
Ethinic Group A I C W Other
Period of Engagement in Project From Y Y Y Y Y W M - D D
To Y Y Y Y - M M = D D
Training Method M1 M2 M3 M4 M4
Employed Unemployed Unemployed
Employer (where applicable)
Total hours
Section G: Contact Details; Employer's Accounting Officer
Name of Accounting Officer Title Initials Surname
Name of Accounting Officer Title Initials Surname e-mail
Name of Accounting Officer Title Initials Surname e-mail Mobile 0
Name of Accounting Officer Title Initials Surname e-mail Mobile 0
Name of Accounting Officer Title Initials Surname e-mail Mobile 0
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Name of Accounting Officer Title Initials Surname e-mail Mobile 0 -

GIGD PROJECT ASSESSMENT SCHEME: STANDARD FOR DEVELOPING SKILLS NOTIFICATION OF THE ISSUE OF THE CANCELLATION / TERMINATION OF A CONTRACT

	Section A: Employer Information
cidb Employer Number	
Employer Name	
	Section B: Contractor / JV Information
cidb Contractor Registration Number of main / lead contractor	
Name of contractor	
cidb Contractor Registration Number of Joint Venture Partner 2	
Name of contractor /Joint Venture	
cidb Contractor Registration Number of Joint Venture Partner 3	
Name of contractor /Joint Venture	
cidb Contractor Registration Number of Joint Venture Partner 4	
Name of contractor /Joint Venture	
Contact Person	Title Initials Surname
Designation	
e-mail	
Na-h-i-a	
Mobile Office Telephone	
Office Telephone	Section C: Contract Data
cidb Contract Number	
Contract Title	
Final Tender Sum R	.00
Date of cancellation / termination	Y Y Y Y - M M - D D
	Section D: Actual Training Costs Achieved
Actual training costs achieved R	.00
(Complete One per bene	Section E: Actual Training Records ficiary or attach pdf copy of signed Form A5 Final Training Report)
Beneficiary	
20	ID I I I I I I I I I I I I I I I I I I
Gender	MF
	The Control of the Control
Ethinic Group	A I C W Other
Ethinic Group Period of Engagement in Project	
Period of Engagement in Project	From Y Y Y Y = M M = D D To Y Y Y Y = M M - D D
	From Y Y Y Y - M M - D D To Y Y Y Y - M M - D D M1
Period of Engagement in Project	From Y Y Y

Section E(i) Complete	for a Professional Service Contract only (one per beneficiary)
Total hours	
Beneficiary	Initials Surname
	ID
Gender	M F
Ethinic Group	A I C W Other
Period of Engagement in Project	From Y Y Y Y - M M - D D
	To Y Y Y Y - M M - D D
Training Method	M1 M2 M3 M4
	Employed Unemployed
Employer (where applicable)	
Total hours	
Section 1	on F. Declaration; Employer's Representative
Name of Representative	Title Initials Surname
Designation	
e-mail	
Mobile	0
Office Telephone	0
Date	Y Y Y Y . M M . D D
I, the undersigned warrant that:	
I am duly authorised to submit this representation of this postion are within	otice on behalf of the Employer n my personal knowledge, and are to the best of my belief both true and correct.
	Thry personal knowledge, and are to the best of my benefit but the and somest.
Signature	
<u> </u>	
Date completed	X X X X - M M - D D
Please attach pdf copy of signed Fo	orm A5 Final Training Report
	cidb Official Use Only
cidb Contract Number	
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cidb PROJECT AS	SESSMENT SC PROJE	HEME: STANDAR CT TRAINING PL	D FOR DEVELOPING AN	SKILLS
	Section A	Employer Inform	nation	
cidb Employer Number				
Employer Name				
	Section B. C	ontractor / JV Infe	ormation	
cidb Contractor Registration				
Number of main / lead contractor				
Name of contractor			_	
Contact Person	Title	Initials	Surname	
Designation				
e-mail				
Mobile	0	-		
Office Telephone	Co. In the second second	- [
	Sect	on C: Tender Dat	a line in the second	
cidb Contract Number				
Contract Title				
Sect	ion D:Contract	Skills Developme	int Goal (GSDG)	
Tender Sub-total (excl. VAT) R				• 0 0
	Class of Works			
Minimum Target Contract Skills De	velopment Goal	(%)		
Target Contract Skills Developn	nent Goal R			• 0 0
Contract Skills Development Goa	al Planned R			.00
Section E:	Budgeted Train	ning Hours (Profe	ssional Services only	y)
0,015 / 100 x Tender Sub-	total (excl.VAT)			Hours
Section F	: Construction	Skills Developme	nt Goal Training Plan	
	Na	No.	Duration	Contract Skills
Training Method	No. Unemployed	Employed	(Months)	Development Goal
	· · · · · · · · · · · · · · · · · · ·			(%)
Method 1 (Skills Programme)				
Method 2 (TVET & Apprentice)				
Method 3 (P1& P2)				
Method 4 (Candidacy)				
			Total (%)	
			Accounting Officer	
Name of Accounting Officer		Initials	Surname	
e-r	mail			
	obile 0			
Office Telepho	one 0	-		

Section H: Decl	aration; Employer's Re	epresentative
Name of Representative Title	Initials	Surname
Designation		
e-mail		
Mobile 0		-
Office Telephone 0	-	-
Date Y Y	Y - M M	- D D
I, the undersigned warrant that: I am duly authorised to submit this notice on beh The contents of this notice are within my personal		o the best of my belief both true and correct.
Signature		
Date completed Y Y	Y Y - M M	- D D
Please attach pdf copy of signed Form A2 Bas	eline Training Plan	



DEVELOPMENT THROUGH PARTNERSHIP

CIDB SKILLS STANDARD

CIDB RECOGNISED SKILLS DEVELOPMENT AGENCIES

CIDB Recognised Skills Development Agencies	Recognition Province Contact Contact Email Address	Date End Person Number	01/04/2025 National Pranveer 012 482 7230 pranveerh@cidb.org.za	Harriparsadh	Thabelo 012 482 7249 thabelor@cidb.org.za	Ramaru								
Recognis	Status		Active											
CIDB F	SDA Registration	Number	SDA/ZA/16/00001											
	Name of SDA		CIDB SDA											
	No		10		05		03	40	0.5	90	0.7	80	60	10

CIDB SKILLS STANDARD BASELINE TRAINING PLAN

CIDB Skills Standard Baseline Training Plan

	Contract	or Details			
Contractor Name:	123Building and	construction			
CRS Number:	0000000				
Estimated start date	1 April 2021				ļ
Estimated Completion date	2 May 2022				
Size of Organisation	Small (1-49 employees)	Medium (50-149 employees)	J	Large (≥150 employees)	
			1		

	Contractor Contact Details
Name of Contact Person	Mr Xolani Smith
Designation of Contact Person	Construction Manager
Contact Details	Cell Number: XXX XXXX XXX
	Landline Number: XXX XXXX XXX
	Email address: Smith@123building.co.za

2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cont	ract Data		
Project Name	JHB Central Ho	mes		
CIDB Contract Number	#ZZ ZZZZ ZZ			
Name of Client:	Gauteng Depar	tment of Infrastruc	ture Developme	ent
Project Description	Recreational Ce	ntre		
Final Tender Sum (at tender award)	R65 700 000			
Project Location	Johannesburg (Central 1234 Main S	Street Plot 879	
Project duration	12 months	•		
Estimated start date	1 April 2021			
Estimated Completion date	2 May 2022			
Description	Designation	Project Value	CSDG %	Min CSDG Target
Civil Eng.	CE		0.25	
General Building	GB	R65 700 000	0.50	R328 500
Civil & General Building	CE & GB		0.375	
Electrical Eng.(Building)	EB		0.25	
Electrical Eng.(Infrastructure)	EP		0.25	
Mechanical Eng.	ME	12	0.25	
Specialist	SW		0.25	
Total		R65 700 000		R328 500

	Const	ruction Skills Devel	Construction Skills Development Goal (CSDG) Baseline Training Plan		
Training Method	Number of Employed Learners	Number of Unemployed Learners	Area/s of Specialisation/Trade	Duration of Placement	Total Notional Cost
Method 1: Skills Programme		3	Scaffolding	3 months	R57 000
Method 2: FET College Graduates/ Apprenticeship	0	5	Bricklaying and Plastering	12 months	R92 000
Method 3: P1 and P2 learners or a 240 credit qualification	0	0	-	1	1
Method 4: Candidacy with 360 credit qualification	0	Ann	Project Management	9 months	R184 500
Total		9			R333 500

Note: Refer to Table 3 in the Standard for Developing Skills through Infrastructure Contracts Government Gazette 43495 of 3 July 2020 for the notional costs

Designation:	Date:	Designation:	Date:
Contractor's Representative Name:	Signature:	Employer's Representative Name:	Signature:

Form A2 Baseline Training Plan Version 2 - 01/04/2021

For Office Use for SDA		
Action	Status	
Project verified on CIDB Register of Projects (RoP)	Yes	No
Training plans developed	Yes	No
Appropriate learners available	Yes	No
Target learners sent to contractor	Yes	No
SDA processes explained to contractor	Yes	No
Placement plan developed	Yes	No
Training Method	Percentage (%) the CSDG	contribution to
Method 1		
Method 2		
Method 3		
Method 4		
Total		
CIDB SDA Contact Person: Mr Pranveer Harriparsadh or T Email address: <u>pranveerh@cidb.org.za</u> or <u>thabelor@cidb.org</u>		
SDA Representative Name:	Designation:	
Signature:	Date:	<u> </u>

		THE REAL PROPERTY.	100 Marie				FORM A3: PR	OUECT INTERIM	FORM A3: PROJECT INTERIM TRAINING REPORT	SECTION SECTIONS	STATE AND ADDRESS OF THE PARTY	A STATE OF THE PARTY OF THE PAR		
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cidb Employer Number														
Employer Name						and said.	60 to 6000	200 200 200 200 200 200 200 200 200 200	Sent the second of the second	Shipping and the state of the	7	and the College of th		
		N Marie	NAME OF TAXABLE	TO SOUTH			And it constituted that a straight is	The state of the s	1 Bross	and the control of the control of the second	. erde.	AND CONTRACT OF THE PARTY OF TH	And the second s	
cidb Contract Number Contract Title														
Tender Value (R)														
Contract Skills Development Goal (R) SIP Number (If Applicable)														
SIP Project Code (If Applicable)														
Training Methods: Method 1(M1): structured workplace les Method 2(M2): structured workplace les Method 3(M3): work integrated learning	aming opportuniti aming opportuniti g opportunities for	ies for learners ies for apprenti r University of	s towards the atta ices or other artis Technology or Cc	inment of a part of an Ieamers towan symptehensive Unit	r a full occupation ds the attainment versity students oc	al qualification; of a trade qualific ampleting their ne	ation leading to a lik stional diplomas;	n leading to a listed trade subject to al diplomas;	at least 60% of the artisan I.	Training Methods: Training Methods: Method 1(M1): structured workplace learning opportunities for learners towards the attainment of a part or a full occupational qualification. Method 2(M2): structured workplace learning opportunities for apprentices or other artisan learners towards the attainment of a trade qualification leading to a listed trade subject to at least 60% of the artisan learners being holders of public TVET college qualifications. Method 2(M2): structured workplace learning opportunities for University of Technology or Competents the attainment of a trade qualification leading to a learning opportunities for University of Technology or Competents were University structured in Technology or Competents were understanded in Technology or Competent and a trade of the Order of the Artifacture Competent and the Order of the Order of the Artifacture Competent and the Order of the	ge qualifications;			
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Learner/Caupitiotes Full Name and Gurranne				Welliny Numb			Placement Start Date	art Planement End. Date	d Occupation Trade Description	Description of Practical Teals Completed (as pre Reproof or POE)	Station Station	(USH) (CO) (A)(LO) (CO)(D) (CO)(D) (A) (CO)(D) (A) (CO)(D) (A) (CO)(D) (A) (CO)(D) (A) (CO)(D)	ynthe eus illweth ATHS	etine or AG
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							1 1/4 (digital)	STATISTICAL MANAGEMENT	TIGHT COLLEGE CRITICALL TO CASE					
the unites	Name of Cr Offic Signed warrant that:	Name of Contractor Rep Title Contractor Rep Title Contractor Rep Title Contractor Contra	initials in the Contractor		Sumanne									
• The conte	ants of this notice are	within my personal Signature	al knowledge, and an	s to the best of my beli.	ef both true and corre.	님								
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	Name of Re	Name of Representative Title	e Initials		Suname		8-28-11	toer redouglishing	Verte Ruju es sal kituju:					
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I, the under • The confe	raigned warrant that: ants of this notice are:	within my persona	al knowledge, and are	 I. the undersigned variant that: The contents of this roulice are within my personal knowledge, and are to the best of my belief both tive and correct. The contents of this roulice are within my personal knowledge, and are to the best of my belief both tive and correct. 	ef both true and corre	ಕ								
	Ö	Date completed	- A		^ 									
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Supervisor/Learner Agreement

Memorandum of understanding between Supervisor and Learner

The Contractor is responsible for the effective management of the learning opportunities provided through the cidb Standard for the Development of Skills through Infrastructure Contracts (cidb Skills Standard). The attainment of successful learning outcomes and professional development of the learners is largely dependent on the relationship between the assigned Supervisor and the Learner. As a participant in the implementation of the cidb Skills Standard you agree to the Supervisor relationship and commit to endeavour through the challenges of a construction project to give value to the training programme.

The Responsibilities of a Supervisor to the Learner include:

- stimulating a passion for construction
- sharing technical and practical knowledge
- fostering the development of technical and leadership skills
- facilitating networking within the working community
- instilling an expectation of personal growth and learning by the Learner
- developing knowledge and understanding in the areas of health, safety, environment, quality and production
- inculcating professionalism and a desire for continual improvement by the Learner
- creating a nurturing relationship that instils a sense of discipline and professional pride
- giving constructive feedback and
- signing the Learners logbook.

Supervisor's name			
Signature:	Date:		

The Responsibilities of a Learner are:

- adhere to the Host Employer's onsite rules and policies
- have an expectation of personal growth and learning
- to be enthusiastic and motivated
- to be open and accept supervision from the Supervisor and other colleagues
- to develop a thorough understanding of health, safety, environment, quality and production
- to have a positive attitude
- to display a strong sense of discipline and to be conscious of time
- to operate within the team
- to take the time to learn and practice new skills
- to make time to fill in your logbook and obtain the Supervisor's signature for completed tasks

Intern's Name:	ID No:	
Signature:	Date:	

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