



APPLICATION FOR ADMISSION

JANUARY 2024 INTAKE

Attach Recent

Passport Photo

Here

Instructions for the completion of the form

1. Complete in **Block Letters** in black/blue ink.

2. **KINDLY TAKE NOTE THAT APPLICATIONS FOR ADMISSION ARE ABSOLUTELY FREE OF ANY CHARGE.**

3. This application must be accompanied by certified copies of national identity document and relevant academic certificates/ latest school results.

4. The form is to be submitted at the Siya Institute of Vocational Education and Training Center or mailed to Siya Institute of Vocational Education and Training P O Box 8, Ruacana, on or before **31 January 2024.**

5. No Faxed or Emailed applications will be accepted.

Attach Certified Copies of:

ID/Full Birth Certificate

School Leaving Certificate/Latest Results

| Choice of study (Mark in appropriate box with an 'X') | | | | |
|--|------------------------|------------------------|-------|--|
| For which trade do you apply? Please mark your choices with an (X) | | | | |
| Trade | 1 st Choice | 2 nd Choice | Level | Committee approval (<i>please do not write on this column</i>) |
| Electrical General | | | | <input type="checkbox"/> |
| Hospitality & Tourism | | | | <input type="checkbox"/> |
| Plumbing And Pipe Fitting | | | | <input type="checkbox"/> |
| Occupational Health and Safety | | | | <input type="checkbox"/> |
| Office Administration | | | | <input type="checkbox"/> |

Educational background

School/ Institution Attended: Region:

Address:

Highest grade:

Phone : Fax: Year of Examination:

Email:

Subjects of the highest Grade passed

| Grade 10 (JSC) or Grade 12 H/ IGCSE or NSSC (O/H) or 9,11 or 12 New Curriculum | Levels | Subject passed | Grades/Symbols | Year attained |
|--|--------|----------------|----------------|---------------|
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Employment Information (Attach Resume)

Employer:

Employer Address:

Phone: _____ Position Held: _____

Declaration

I confirm that all the information I have given are correct to the best of my knowledge and that all supporting documents are genuine.

Signature of applicant

_____ Date

Office Use Only

Comment: Cash _____ Bank Deposit _____ Electronic _____

OBLIGATIONS

If Selected for training, you will have to pay a training fees per the course (Entry Levels) of your choice as follow:

- N\$ 7800.00 for Hospitality and Tourism**
- N\$ 10200.00 for Electrical General**
- N\$ 9000.00 for Plumbing and Pipe Fitting**
- N\$ 8400.00 for Office Administration**
- N\$ 9000.00 for Occupational Health and Safety**

Non- Refundable Registration Fee: N\$ 750.00
Fees Payable at Registration: N\$ 1500.00 (Registration + First Month Instalment)

Kindly consult our fee structures for detailed payment information.

NB: If selected to stay in hostel, you be will required to pay **N\$ 350.00** per month for accommodation for six months. You will also be required to bring your own bed sheets and blankets and kitchen cutleries.

Payments can be made by cash at the Centre or direct bank transfer or deposits into the account:

SIYA INSTITUTE OF VOCATIONAL EDUCATION AND TRAINING
BANK WINDHOEK ACCOUNT NUMBER: 8025616106
CURRENT ACCOUNT
ONGWEDIVA BRANCH
BRANCH CODE: 485 – 673

Application for hostel accommodation

SIVET has limited space for accommodation. Admission to the centre does not necessary grantee hostel accommodation.

Take Note: This is a self-catering hostel.

APPLICANT'S PARTICULARS

Surname :

First Name /s:

Date of birth:

ID Number :

Gender: Male

Female

Cell:

Phone :

Nationality :

Residential (home) Address:

Postal Address:

Region:

Marital status:

Single

Married

Email Address:

EMERGENCY CONTACTS/LEGAL GUARDIAN

Name:

Relationship:

Home Address(Town/Village)

Region:

Telephone number:

Cell phone number:

Email Address

DECLARATION

I hereby confirm that all the information provided is correct to the best of my knowledge and that all the attached supporting documents are authentic. Any false information will lead to my application being not considered.

Signature of applicant: Date: day of2023

FOR OFFICE USE ONLY (Do not fill in please)

| | | | |
|--------------|--|---------------|--|
| semester | <input style="width: 90%;" type="text"/> | Year | <input style="width: 90%;" type="text"/> |
| Trainee No | <input style="width: 90%;" type="text"/> | Trade & level | <input style="width: 90%;" type="text"/> |
| Block | <input style="width: 90%;" type="text"/> | Room Number | <input style="width: 90%;" type="text"/> |
| Signature HC | <input style="width: 90%;" type="text"/> | Date | <input style="width: 90%;" type="text"/> |

| FINANCIAL ASSISTANCE (<i>Mark in appropriate box with an 'x'</i>) | | | |
|--|-----|--------------------------|----|
| Do you need financial assistance? | Yes | <input type="checkbox"/> | No |
| Do you need hostel accommodation? If yes, fill the hostel form | Yes | <input type="checkbox"/> | No |

| HEALTH PARTICULARS | |
|---|--|
| Do you have any Disability? | yes <input type="checkbox"/> No <input type="checkbox"/> |
| If yes, state the nature of your disability. | |
| | |
| Based on your disability, do you have any special need/s? (<i>please specify</i>) | |
| | |
| Do you suffer from any chronic disease/s? | |
| Please specify. | |

DECLARATION

I hereby confirm that all the information provided is correct to the best of my knowledge, and that all the attached supporting documents are authentic. Any false information will lead to my application being disqualified.

| | |
|--|----------------------------------|
| Signature of applicant: _____ Signature of guardians: _____ (<i>if applicant is under the age of 18</i>) | Date : _____ Date : _____ |
|--|----------------------------------|

FOR OFFICE USE ONLY (Do not fill in please)

Payment: Cash
postal

slip:
order:

Receipt number:

Status of the Application:

Admitted

Not Admitted

Reason(s):

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