



# REGISTRATION FORM:

**Address: Unit 15, Tulusa Business Park, Thulisa park**

Plumbing  Electrical  Trade Test Preparation  Trade Test

Have you attempt trade test before? Yes/No	
If yes, please complete the red block:	
Centre name:	
Date of previous test:	
Test attempt number:	
Full Name:	
Surname:	
Known As:	
Date of birth:	
Gender:	
Race:	
Marital Status:	
South African ID Number:	
If you are not a South African Citizen please complete the below:	
Nationality:	
Passport Number:	
Country of issue:	
Do you have a valid work permit?	
Contact phone number:	
Home Address:	
Medical Information: (Do you have any disability, medical condition, or allergy we should be aware of) Yes or No:	
If yes, please provide details:	
If you know your blood type please indicate:	
House Doctor Name & Contact number:	
Emergency contact: (Name, surname, Cell, email)	

**GAUTENG**



Artisan College

# REGISTRATION FORM CONTINUED:

<b>Candidate qualification:</b> (Qualification, Institution, year completed)	
<b>Candidate relevant trade work experience: (current employer, contact person, position, phone number, email, work start date, your occupation)</b>	
<b>Previous employer:</b> (contact person, position, phone number, email, work start date, your occupation)	

I declare that above information is accurate and true

Signature: \_\_\_\_\_

Date: \_\_\_\_\_