

Attorneys • Notaries • Conveyancers

#### Directors

Arno Van Deventer (LL.B)
Cor Van Deventer (LL.B)

#### General

Postal Address: Postnet Suite 47 Private Bag 51 Rivonia, 2128

Docex 38, Rivonia

### Johannesburg Office

Jonannesburg Office
Telephone: +27 (87) 357 8811
Fax: +27 (86) 411 7780
Physical Address: 7 Mellis Avenue,
Brandenham Hall, Ground Floor,
North Block, Rivoria Sandton, 2128

### Cape Town Office

Cape Town Office
Telephone: +27 (21) 982 2629
Fax: +27 (86) 411 7980
Physical Address: 2 Aruana Street,
Brackenfell, Cape Town, 7561

NBIII Pleas	se complete	this form	in block	letters v	with a	black pen
IND::: FICUS	se complete	11113 101111	III DIOCK	ICIICI 3	AAIIII M	DIGCK PCII

## **SECTION A: PERSONAL DETAILS**

Surname:						Initials:			Title:						
Full Names:															
Date of birth:									Age:		Gender:	Male		Female	
ID Number:		Nationality:													
If not SA Citizen state status:															
Equity: (Black/Indian/White/Other):															

### **SECTION B: CONTACT DETAILS**

Physical Address:			
		Code:	
Postal Address:			
		Code:	
Tel (work):	Tel(home)		
Fax No:	Cellular		
E-mail:		Home language:	

# **SECTION C: EMPLOYMENT and EDUCATIONAL DETAILS**

Are you currently employed?			Yes:		No:		Years in current position:			
Current occupation (job title):										
Employer:	·									
Employer telephone										
Employer/Superviso										
Employer/Superviso										
								Code		
Tertiary Education: Matric : Yes				No		Matric Mat	ns : Yes		No	
Post Graduate Qualification (if applicable):										
Tertiary Education:										
EAAB Fidelity Fund Certificate:				Below 5	5 years		Ab	ove 5 year	S	



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#### **SECTION D: QUALIFICATION REGISTRATION**

(Please tick the relevant box)

,			
Name of Programme:			
Have you worked in the Real Esta	ate Industry and for how long?		
Are you currently employed as In	tern Estate Agent?		
Please provide your EAAB Registi	ration details. (If available) :		
Please provide your company reg	gistration details:		
	strue to the best of my knowledge ponsibilities of myself and Van I	D No: ge. In signing this application form, I accept Deventer & Van Deventer Incorporated in th	
APPLICANT SIGNATURE:	Date	:	
OFFICE USE ONLY			
RPL booked/confirmed	Invoiced	Invoice No:	
Paid by applicant	Proof		
Date			

## **TERMS AND CONDITIONS:**

- 1. All learners hereby consent to doing the RPL course through Itakane Training Institute.
- 2. Our classes range between 15-20 learners per class. Once you have registered, we will add your name to a waiting list which will make up a class. When the needed numbers to make the class have been reached, we will contact you with further information regarding the start date, venue and attendance schedule thereafter.
- 3. Van Deventer & Van Deventer Incorporated reserves the right to cancel scheduled sessions if there is insufficient demand, and will endeavour to give the candidate reasonable notice of cancelation and make alternative arrangements.
- 4. Extensions on submissions can be granted provided the learner has given prompt notice, when the learner is unable to complete through illness or reasons beyond his/her control which must be proven.
- 5. Van Deventer & Van Deventer Incorporated is not responsible for any delays that may occur in the issuing of final certificates by th
- 6. Certificates or Statement of Results will only be issued once the learner's account has been settled in full with RPL Assessment Centre (Pty) Ltd.
- 7. It is the learner's responsibility to update any contact details that may change from the time after completing the application form.