

APPLICATION FORM FOR CPD ASSESSOR APPOINTMENT

A. ASSESSOR INFORMATION

Title (Dr/Mr/Mrs/Ms/Prof)		
Name/s		
Surname		
ID or Passport no.		
Designation		
Gender (for equity purposes)		
Race (for equity purposes)		
Disability (for equity purposes)		
Postal Address		
Contact details	Tel.	
	Mobile	
	E-mail	

B. EMPLOYMENT VERIFICATION DETAILS

Employment status (<i>cross out relevant response</i>)	Unemployed	Employed	Self-employed
Position in Company (<i>if relevant</i>)			
Name of Employer (<i>if relevant</i>)			
Contact details of Employer (<i>if relevant</i>)	Address		
	Tel no.		
	Email address		

C. EXPERIENCE

Relevant Industry and/or Training Experience	
How many years of experience do you have?	
SETA registration	
Which SETA are you registered with?	
Professional Body registration	
Which Professional Body are you registered with?	

D. QUALIFICATION VERIFICATION DETAILS

No.	Name of Educational Institution	Name of Qualification attained	Date conferred
1.			
2.			
3.			
4.			

Achievement of unit standards (<i>Do you have any of these unit standards?</i>)		
Facilitate learning using a variety of given methodologies	YES	NO
Design outcomes-based learning programmes	YES	NO
Develop outcomes-based learning programmes	YES	NO
Evaluate a learning intervention using given evaluation instruments	YES	NO

I solemnly declare that, to the best of my knowledge, all the information contained in my application is true and correct.

Applicant's Signature: _____ **Date:** _____

For Office Use

Confirmation of supporting documents (tick ✓ if submitted)

Certified Copies of ID document	
Curriculum Vitae	
Certified copies of all qualifications (including unit standards)	
SETA registration (<i>if applicable</i>)	
Signed CPD Assessor Code of Conduct	

