

EPWP: CONTRACTOR DEVELOPMENT TRAINING PROGRAMME: INFORMATION FORM
PLEASE ANSWER ALL QUESTIONS ON SECTIONS A, B AND C

PERSONAL DETAILS:		✓ Please tick where applicable	
Current Area of Residence	<input type="checkbox"/> Cape Metro <input type="checkbox"/> Eden <input type="checkbox"/> Winelands <input type="checkbox"/> Overberg <input type="checkbox"/> Central Karoo <input type="checkbox"/> West Coast	TOWN:	Please select CDP training program you would like to attend
Surname	First Name/s		1 Day Construction Information Session
Date of Birth	ID Number		8 Week Training Program
Race	<input type="checkbox"/> African <input type="checkbox"/> Coloured <input type="checkbox"/> White <input type="checkbox"/> Indian	Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Disability	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please specify	Advanced Training and Mentoring
Address		Postal Code	5 Day Health and Safety
Contact Number/s	Home:	Office:	Cell 1:
			Cell 2:
E-mail address 1	E-mail address 2		
Name of family member or friend:		Contact number of family member or friend:	
Email address of family member or friend:			
YOUR COMPANY INFORMATION:			
Company Name: _____		Company address: _____	
Company Contact no: _____		Company Registration no: _____	
Are you CIDB registered	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	Reg no:	Is your company BBBEE Registered
Are you registered on the Western Cape Supplier Database	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	Reg no:	<input type="checkbox"/> Yes/ <input type="checkbox"/> No
Are you registered on the Central Database	<input type="checkbox"/> Yes/ <input type="checkbox"/> No	Reg no:	Is your company registered on any other body
Please provide your CIDB grading: _____ (e.g. GB1 / CE2)		Name of other registering body: _____ Reg no:	
		What does your company specialize in _____	

EDUCATION AND TRAINING BACKGROUND:			
Have you ever participated in any training or mentoring programme offered by the Department of Transport and Public Works: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please list the training:			
Have you ever participated in any training or mentoring programme offered by any Government Department or Private Sector Company or Organization: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes please list the training:			
Highest Qualification:		Name of School/ Institution	
Have you ever completed a construction project or tendered for a project. <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide details of tender or project:		



Please tell us a little more about your company

B

<p>1. <u>Briefly describe the nature of your company or business.</u></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	<p>2. <u>Please provide a list of projects your company is currently busy with: (if any). Please give start and end dates.</u></p> <p>a. _____</p> <hr/> <hr/> <p>b. _____</p> <hr/> <hr/> <p>c. _____</p> <hr/> <hr/>
---	--

<p>3. <u>Please give a list of projects your company completed recently: (if any) please give start and end dates.</u></p> <p>a. _____</p> <hr/> <hr/> <p>b. _____</p> <hr/> <hr/> <p>c. _____</p> <hr/> <hr/>	<p>4. <u>Please give a list of Tenders your company are currently completing and wish to submit. (if any). Briefly explain nature of tender/s.</u></p> <p>a. _____</p> <hr/> <hr/> <p>b. _____</p> <hr/> <hr/> <p>c. _____</p> <hr/> <hr/>
--	--



C

<p>5. <u>Please give a list of Tenders your company completed (if any), and submitted and now waiting on responses.</u></p> <p>a. _____ _____</p> <p>b. _____ _____</p> <p>c. _____ _____</p>	<p>6. <u>Briefly explain why you think your company can benefit from the Departments Mentoring Programme.</u></p> <p>_____ _____ _____ _____ _____</p>	
<p>7. <u>Briefly describe some of the challenges you are facing in your company (if any)</u></p> <p>_____ _____ _____ _____</p>		
<p>8. <u>How many employees do you have in your company (if any):</u></p>	<p><u>Permanent:</u></p>	<p><u>Part Time:</u></p>

Declaration by Applicant:

I hereby confirm that all the information provided is complete and correct to the best of my knowledge. I understand that any false information supplied could lead to my application being disqualified or my contract terminated.

Signature of Applicant: _____

Date: _____