FORM A5: FINAL TRAINING REPORT

Section A: Employer Information

cidb Employer Number

Employer Name

Section B: Contract Data

cidb Contract Number

Contract Title

Tender Value (R)

Contract Skills Development Goal (R)

SIP Number (If Applicable)

SIP Project Code (If Applicable)

SECTION C:Definitions and Beneficiary Information

Training Methods:
Method 1(M1): structured workplace learning opportunities for learners towards the attainment of a part or a full occupational qualification;
Method 2(M2): structured workplace learning opportunities for apprentices or other artisan learners towards the attainment of a trade qualification leading to a listed trade subject to at least 60% of the artisan learners being holders of public TVET college qualifications;
Method 3(M3): work integrated learning opportunities for University of Technology or Comprehensive University students completing their national diplomas;
Method 4(M4): structured workplace learning opportunities for candidates towards registration in a professional category by a statutory council listed in Table 1 in the CIDB Standard for Developing Skills Through Infrastructure Contracts Gazette No. 43495

Learner/Candidates Full Name and Surname	Gender		Ethnic Group					Identity Number												Training Method (Please tick)				Placement Start Date	Placement End Date	Placement Duration	Occupation/Trade Description	Description of Practical Task Completed (as per logbook or POE)	Status	Supporting documents available on request (Yes,No or N/A)										
	Male	Female	Black	White	Coloured	Indian	Other													M1	M2	M3	M4							Training Plan	Attendance Register	Signed Logbooks/POE	Entry Medical Assessments	Exit Medical Assessments	Conducted Sumative Assessment	Site Induction	Health and Saftey Induction	Registered with Relevant SETA	PPE Register	Register Beneficiaries with CIDB SDA
Eg. Xolani Smith	1				1			1	2	3	4	5	6	7	4	5	6	8	9	1		X			2021/06/01	2021/09/31		Bricklaying	Read and interpret drawings Set out building as per drawing Transfer levels using dumpy level Batch and mix concrete	Completed In progress In progress Completed	Yes	Yes	Yes	Yes	Yes	N/A	Yes	Yes	No	Yes	Yes

Section D: Declaration; Contractor Representative

Name of Contractor Rep Title Initials Surname

Designation

e-mail

Mobile 0 - - -

Office Telephone 0 - - -

Date Y Y Y Y - M M - D D

I, the undersigned warrant that:
- I am duly authorised to submit this notice on behalf of the Contractor
- The contents of this notice are within my personal knowledge, and are to the best of my belief both true and correct.

Signature

Date completed Y Y Y Y - M M - D D

Section E: Declaration; Employer's Representative

Name of Representative Title Initials Surname

Designation

e-mail

Mobile 0 - - -

Office Telephone 0 - - -

Date Y Y Y Y - M M - D D

I, the undersigned warrant that:
- The contents of this notice are within my personal knowledge, and are to the best of my belief both true and correct.

Signature

Date completed Y Y Y Y - M M - D D