Artisan Training for Self – Employment Application Form

2027 - January Intake

CONDITIONS:

a) Application fee – Non-refundable ***N$50.00.***

Banking Details: Standard Bank Namibia
Account Name: KAYEC
Account No: 043253563
Branch Code: 082372 (Universal Code: 087373)
Branch Name: WINDHOEK
Reference: Applicant name and surname e.g., Johanna Titus

b) Fill in the areas on the application form using BLOCK LETTERS with black ink.

c) Attach **certified** copies of highest qualification obtained, ID or Birth Certificate.

d) Important Dates: ***Applications deadline: 20 January 2027***
Aptitude Test: 25 January 2027 @ 08h30

e) Library fee - Non-refundable ***N$200.00*** *is required upon admission*

Training will start on the 1st February 2027, and all trainees are expected to be at the centre strictly at 07h15.

TRAINING CENTRE

✓ **WINDHOEK**

COURSE APPLIED FOR

- First Choice: *

☐ Clothing Production - Lev 1	☐ Electrical General - Lev 2
☐ Cosmetology - Lev 2	☐ Joinery and Cabinet Making - Lev 1
☐ Early Childhood Development	☐ Plumbing and Pipefitting - Lev 1
	☐ Welding and Metal Fabrication - Lev 2

Note: The duration is **1 YEAR** for all the courses

- Second Choice: .....

A PERSONAL PARTICULARS

1. Surname *

2. First Names *

3. ID Number

4. Date of birth * D D / M M / Y Y Y Y

5. Postal address

_____

_____

_____

6. Residential address *

_____

_____

_____

7. Contact number * _____

8. Email Address * _____

9. Gender *
☐ Male
☐ Female

10. Marital Status *
☐ Married
☐ Unmarried
☐ Divorced
☐ Widow/er

11. Marginalized *
☐ San
☐ Ovatjimba
☐ Ovatue
☐ N/A

12. Are you an Orphan *	
☐ Yes	☐ No
13. Do you have Albinism	
☐ Yes	☐ No
14. Are you Vulnerable *	
☐ Yes	☐ No

These training opportunities will be funded by NTA under 35% key priority training allocation of the Vocational Education and Training (VET) levy.

15. Next of kin Name _____ **16.** Next of kin Relationship _____

17. Next of kin Contact _____

18. Do you have any difficulties/disability *
☐ No known disability
☐ Blind / Visual impairment
☐ Deaf / Hearing impairment
☐ Physical disability
☐ Mental health condition
☐ Health condition *(Epileptic, nervous or trauma, Asthma, low or high blood pressure)*
☐ Learning impairment
☐ Allergic (skin problem)
☐ Autistic spectrum disorder
☐ Another disability / medical condition

19. Home Language
☐ Oshiwambo
☐ Khoekhoegowab
☐ Afrikaans
☐ Otjiherero
☐ RuKwangali
☐ siLozi
☐ German
☐ San
☐ other

20. Nationality *
☐ Namibian
☐ Other

21. Region of Origin (Home)
☐ Erongo
☐ Hardap
☐ Karas
☐ Kavango East
☐ Kavango West
☐ Khomas
☐ Kunene
☐ Ohangwena
☐ Omaheke
☐ Omusati
☐ Oshana
☐ Oshikoto
☐ Otjozondjupa
☐ Zambezi

22. Special learning needs _____

(State any special learning tools needed if necessary)

B EDUCATION

22. Which year did you leave school? ☐☐☐☐ **23.** What is the highest grade you passed? * ☐☐

24. Name of the school _____

C OTHER INFORMATION

25. From where do you get Funding?
☐ Self-funding
☐ Parent/Guardian funding
☐ Sponsored
☐ Loan
☐ Other

26. Who is your guardian? *
☐ Father
☐ Mother
☐ Brother/Sister
☐ Grand Parent
☐ Uncle/Aunt
☐ Other Relative
☐ Non-Relative

27. Can your Guardian Fund you?
☐ No capacity
☐ Partial capacity
☐ Full capacity
☐ Don't know

28. Are you Employed?
☐ Yes ☐ No

D GENERAL INFORMATION

29. From where did you hear about KAYEC training program?	
☐ Newspaper	☐ School
☐ Radio	☐ Social media
☐ TV	☐ Other

I hereby acknowledged that I have read the above conditions and accept it. I also agree that if it is discovered that I provided wrong and/or false information on this application form, my application will not be considered

Signature of Applicant:..... * Date.....

Signature of Guardian:..... Date.....

(If applicant is under 21 years of age)

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