



**TVET CURRICULUM DEVELOPMENT, ASSESSMENT AND CERTIFICATION COUNCIL
(TVET CDACC)**

Application form for accreditation of assessor and verifier

TYPE OF APPLICATION	TICK (as applicable)
1. Assessor Accreditation	
2. Verifier Accreditation	

PERSONAL DETAILS					
Surname		First name		Other names	
ID No. (citizen)					
Passport No. (Non-citizen)					
Date of Birth (dd/mm/yyyy)					
Gender <i>Please tick as appropriate</i>	Male		Female		
Disability (<i>Tick as applicable</i>)	Yes	No	<i>If yes, specify</i>		
Physical Address			Postal Address		
Phone:			Mobile:		
e-mail:					

APPLICANT'S QUALIFICATIONS Academic/Professional Qualifications Achieved (<i>Please attach certified copies</i>)

APPLICANT'S RELATED WORK EXPERIENCE			
OCCUPATION	JOB TITLE	PERIOD	
		FROM	TO

Provide a brief description of relevant work experience for the Unit(s) of Competency you are applying to be accredited to assess and/verify. ***Please attach evidence.***

You may use additional paper if more space is required.

SPECIFIC ACCREDITATION INFORMATION	
COURSE AND QUALIFICATION LEVEL	UNIT(S) OF COMPETENCY

You may use additional paper if more space is required.

EMPLOYER INFORMATION		
Full Name of Employer <i>(please specify whether company or training provider)</i>		
Duty station		
Postal Address	Code	City/town
Physical Location		
Phone	Mobile	e-mail

Have you ever been trained in competency based assessment? <i>(If yes, please attach certified copy of certificate).</i>	Yes	No
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DECLARATION

I,declare that the information contained in this application is true and accurate to the best of my knowledge.

Signature: Date: