

(Established under the Technical Education, Vocational and Entrepreneurship Training Act No. 13 of 1998 and the TEVET (Amendment) Act No. 11 of 2005.

Birdcage Walk, Longacres, Private Bag RW16X, Lusaka – Zambia, Tel: 260-1- 253331,253332, 253334, 253327, 253211 Fax: 254560/253382; E-mail: teveta@teveta.org.zm

#### APPLICATION FOR ACCREDITATION AS TRAINER / ASSESSOR / EXAMINER

#### **INSTRUCTIONS**

1. Individuals applying for Accreditation to provide Technical Education, Vocational and Entrepreneurship Training (TEVET), shall complete this form in full and forward it to:

The Director General Technical Education, Vocational and Entrepreneurship Training Authority (TEVETA) Birdcage Walk, Longacres Private Bag RW 16X LUSAKA.

- 2. This Form must be completed in BLOCK LETTERS.
- 3. Applicants shall forward **all** the listed documents with their application. No application will be processed if any of the required documents is not provided.
  - 3.1 Certified Copies of the Academic, Professional and Teaching Qualifications
  - 3.2 Detailed Curriculum Vitae
  - 3.3 Certified copy of the Zambia National Registration Card
  - 3.4 In case of Expatriate Lecturers, certified copies of the work or residence permit must be attached together with the relevant page in the passport.

Revised April 2012

All Sections must be completed and those not applicable must be indicated "NA".

# SECTION A: CATEGORY OF ACCREDITATION

Please tick. You may choose more than one category

Category	Trainer	Assessor	Examiner
Please Tick			
Definition	A person who is	A person who is	A person who is
	qualified and	qualified and	qualified and
	registered to	registered to	registered to
	deliver training	judge competence	judge competence
	and guide learners	by assessing the	by examining the
	through a learning	evidence that has	evidence that has
	programme.	been presented.	been presented.

### SECTION B: PERSONAL DETAILS

Title: Prof/ Dr / Mr / Mrs / Miss (Please circle as appropriate)
Surname:
First Name:
Other names:
Gender: (Tick the appropriate) Male: Female:
Residential Address:
Address of correspondence:
Tel No.:
Fax No.: Email:
Nationality: I.D. No
Website:

### SECTION C: ACCREDITATION DETAILS

#### Note that an applicant can only apply for a maximum of Five (05) Subjects

Subjects being applied for:

	Level of Qualification			
Name of Subject	Trade Test	Craft Certificate	Advanced	Diploma
	Trade Test	Certificate	Certificate	Dipionia
	TQF3	TQF4	TQF5	TQF6

# **SECTION D:** DETAILS OF QUALIFICATIONS

List the qualifications attained:

#### Part 1: Academic Qualifications

### (Qualifications attained up to 'A' Level)

Qualification	Awarding Body	Date	
		From	То

Part 2: Professional	Qualifications
----------------------	----------------

Qualification	Awarding Body	Date	
		From	То

Part 3: Teaching Qualifications

Qualification	Awarding Body	Date	
		From	То

## **SECTION E: WORK EXPERIENCE**

List the employers that you have worked for starting with the current job if in employment (if not then the most recent employer).

Name of Employer	Job title	Main Responsibilities	Date	
		_	From	То

(Provide a separate attachment if space is not adequate)

### **SECTION F: REFEREES**

Kindly insert the referees as given on the Curriculum Vitae and of whom one should be a previous employer.

Referee 1	Referee 2	Referee 3
Name:	Name:	Name:
Address:	Address:	Address:
Tel:	Tel:	Tel:
Mobile:	Mobile:	Mobile:
Fax:	Fax:	Fax:
Email:	Email:	Email:

#### **SECTION G: DECLARATION**

I hereby declare that the information provided above is, to the best of my knowledge, accurate and complete.

Signature: ..... Date: .....

# SECTION H: FOR OFFICIAL USE ONLY

Date application received:

Verifications with the Referees:

# COMMENTS

Referee 1:
Referee 2:
Referee 3:
Accreditation Granted/Not Granted for the following subjects:
1
2
4
5

Category of Accreditation:

Trainer	Assessor	Examiner

Level of Accreditation: Full Accreditation / Provisional Accreditation (Circle as appropriate)

Checked by:	
Position:	
Date:	