

Dreyer and Dreyer Risk & HR Solutions Phone: 082 774 9933 Fax: 016 450 4350 E-mail: nicky@dreyerdreyer.co.za Website: www.dreyerdreyer.co.za

Please fill in the form and send it back to us via fax or email.

Name:				
Surname:				
ID Number:		Date	e of Birth:	DD/MM/YYYY
Cell phone:		Ema	ail Address:	
Current address:				
Province:		ZIP	Code:	
EMPLOYMENT IN	NFORMATION			
Current employer:				
Employer address:				
Province:		ZIP	Code:	
Phone Number:		E-ma	ail Address:	
COURSE INFORM	MATION			
Please check the box	next to the course you want to apply for	r:		
☐ Apply Advanced Driving Skills		☐ Basic Safety Awareness		
☐ Conduct moderation of outcomes-based assessments		☐ Conduct an investigation into workplace incidents		
☐ Conduct outcomes-based assessment		☐ Confined Spaces Entry		
☐ Describe the functions of the workplace health and safety representative		☐ Emergency Evacuation Procedures		
☐ Engineering Tools (Electrical & Hand tools)		☐ Hazard Identification Risk Assessment (HIRA)		
☐ Ladder Safety		☐ Manual Lifting Equipment (Basic Rigging and Slinging)		
☐ Operational Signal Course (Flagman)		☐ Perform Basic Fire Fighting		
☐ Provide Primary Emergency Care (First Aid Level 1)		☐ Safety Harness Awareness		
□ Scaffolding the user		☐ Stacking and Storage		
☐ Working at heigh	ts			

DD/MM/YYYY

Signature of Applicant Date



Kindly contact us for more information:

Phone:

Fax:

Website: www.dreyerdreyer.co.za