



NAMIBIA TRAINING AUTHORITY

ANNEXURE 2:

Application for Expansion in Programme offering or amendment of conditions of registration (Regulation 13)

PART 1: Training Provider Details

Registered Name	
Trading As	

If applicable:

Company / Close Corporation	
Registration No	
Registered With	
Date Registered	
Registration Expiry Date	

PHYSICAL ADDRESS	Street 1	
	Street 2	
	City/Town	
	Region	

POSTAL ADDRESS	P O Box	
	City/Town	

Telephone Number	<input type="text"/>	<input type="text"/>
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Fax Number	<input type="text"/>	<input type="text"/>
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Cellphone number	<input type="text"/>	<input type="text"/>
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E-mail address	
Primary Focus of Business	

Contact Person (1)	Title	
	First Name(s)	
	Last Name	
	Designation	
	Cellphone	
	Email	

Contact Person (2)	Title	
	First Name(s)	
	Last Name	
	Designation	
	Cellphone	
	Email	

Branches/ Delivery locations (where applicable)

Branch physical address

Branch postal address

City/Town

Branch contact details

	Branch 1	Branch 2
Tel:		
E-mail:		
Fax:		

Part 2: Expansion in Programme offering Please state additional programme offerings to be introduced

New Programme	Level (if applicable)	Duration

Part 3: Amendment to conditions of registration

Please state the existing condition(s) of registration concerned which the applicant intends to amend, and state how it should be amended:

(a) Existing condition(s):

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(b) How should the condition(s) be amended:

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