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Email: training@compint.co.za

STUDENT ENROLLMENT FORM

| Course Name | | | | | | | | |
|---------------------------------|--------------|----------------|---------|---------|----------|---|---|---|
| Course Date | | | | | Venue | | | |
| Are you an existing Pastel User | Yes | No | | -11 | | | | |
| Company Name (Employer) | | | | | | | | |
| | | | | | | | | |
| Title | | Process | | | Initials | | | |
| First Name | | | | | 145 | | | |
| Surname | | | | | | | | |
| ID Number | | | | | | | | |
| Date of Birth | D | D | М | М | Υ | Υ | Υ | Υ |
| Gender | Male | Female | | | | | | |
| Nationality | | | | | avenil. | | | |
| Socio Economic Status | Employed | Unemployed | | | | | | |
| Home Language | | | | | | | | |
| Work No | | | | , [| | | | |
| Postal Address | | | | | | | | |
| E-mail Address | | | | | | | | |
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| Direct Deposit / EFT for | (PLEASE A | TTACH PROOF | OF PA | YMENT |) | | | |
| Please e-mail proof of Payment | to: | | | | | | | |
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| 632005, Account Number: 4078 | 084575 | | | | | | | |