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CONTENTS • INHOUD

<i>No.</i>		<i>Page No.</i>	<i>Gazette No.</i>
GENERAL NOTICE			
Labour, Department of			
<i>General Notice</i>			
89	Skills Development Act (97/1998): Amendments: Sector Education and Training Authorities (SETAs) Grant Regulations regarding monies received by a SETA and related matters	3	29583

GENERAL NOTICE

NOTICE 89 OF 2007**DEPARTMENT OF LABOUR****SKILLS DEVELOPMENT ACT, 1998 (ACT NO.97 OF 1998)****PROPOSED AMENDMENTS TO SECTOR EDUCATION AND TRAINING
AUTHORITIES (SETAs) GRANT REGULATIONS REGARDING MONIES
RECEIVED BY A SETA AND RELATED MATTERS**

I, Membathisi Mphumzi Shepherd Mdladlana, Minister of Labour, in terms of section 36 of the Skills Development Act, 1998 (Act No. 97 of 1998), and after consultation with the National Skills Authority, hereby publish for public comment proposed amendments to the Sector Education and Training Authorities (SETAs) Grant Regulations regarding monies received by a SETA and related matters published in Government Notice No.R.713 of 18 July 2005.

Interested parties are invited to submit written comments on the proposed regulations within 30 days after the publication notice by:-

- (a) Posting comments to: The Executive Officer
National Skills Authority
Mr S Morotoba
Department of Labour
Private Bag X117
Pretoria
0001
- (b) Fax comments to: The Executive Officer
National Skills Authority
(012) 309 4237
- (c) Deliver comments to: Room 371
Third Floor
Labour House Building
215 Schoeman Street
Pretoria
- (d) E-mail to: malesela.mokoele@labour.gov.za

SCHEDULE

Definitions

1. In these regulations “the Regulations” means the Sector Education and Training Authorities (SETAs) Grant Regulations regarding monies received by a SETA and related matters promulgated by Government Notice No.R.713 of 18 July 2005.

Amendment of Annexures

2. The Regulations are hereby amended by the substitution for Annexure 2 of the following Annexure:

ANNEXURE 2

WORKPLACE SKILLS PLAN

and

ANNUAL TRAINING REPORT

Private Sector Template

Minimum Requirements

SECTION A: ADMINISTRATIVE DETAILS

ENTITY DETAILS

A1: Entity name										
A2: Skills Development Levy (SDL) number										
A3: Postal address of the main office	City									
	Province									
	Postal code									
A4: Standard Industrial Code (SIC code) for the main business activity										

DETAILS OF THE PERSON WHO COMPLETED THE FORM

A5: Title										
A6: Surname										
A7: First name										
A8: ID number										
A9: Telephone number										
A10: E-mail										

BANKING DETAILS

A11: Name of bank										
A12: Account number										
A13: Name of account holder										
A14: Type of account										
A15: Branch name										
A16: Branch code										

SECTION B: EMPLOYMENT SUMMARY

B1: Total number of employees per occupational category, by gender, population group, disability status and age group

Occupations		Male				Female				Total	People with Disability				Age groups		
Code	Occupational category	A	C	I	W	A	C	I	W		A	C	I	W	<35	35-55	>55

B2: Total number of employees in each province

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SECTION C: SKILLS DEVELOPMENT

C1: Planned beneficiaries of training per occupational category, by gender, population group and disability status

Occupations		Male				Female				Total	People with Disability						
Code	Occupational category	A	C	I	W	A	C	I	W		A	C	I	W			

C2: Planned training - unemployed

Code	Occupational category	Type of learning programme	Number to be trained at		
			Entry level	Intermediate level	Advanced level

C2: Planned training - employed

Code	Occupational category	Type of learning programme	Number to be trained at		
			Entry level	Intermediate level	Advanced level

C3: Planned ABET training

ABET Level	Total number to be trained
ABET Level 1	
ABET Level 2	
ABET Level 3	
ABET Level 4	

SECTION D: ANNUAL TRAINING REPORT (Report on training interventions)

D1: Number of actual beneficiaries of training per occupational category, by gender, population group and disability status

Occupations		Male				Female				Total	PWD			
Code	Occupational category	A	C	I	W	A	C	I	W		A	C	I	W

D2: Number of beneficiaries who completed the training interventions

Code	Occupational category	Type of learning programme	Number trained at		
			Entry level	Intermediate level	Advanced level

D3: Total number of beneficiaries who completed ABET programmes

ABET training	Total number of employees
ABET Level 1	
ABET Level 2	
ABET Level 3	
ABET Level 4	

SECTION E: GENERAL COMMENTS

*Insert any clarification or comment that you wish to make on any aspect of the WSP or ATR.
(Provide the number of the item that your comment refers to.)*

SECTION F: AUTHORISATION and STAKEHOLDER SUPPORT (WSP and ATR)

Section F of the template, with the original signatures, must be submitted to the skills development division of the relevant SETA by hand, post or fax by 30 June.

DECLARATION

We, the undersigned, submit this information in fulfilment of this entity's legal obligation in terms of the skills development legislation and regulations. We declare that, to the best of our knowledge, the information contained in this WSP/ATR is accurate and up to date. We recognise that any inaccurate statement in this document may constitute fraud and be subject to the full penalty of the law.

SIGNATORIES

F1: Designated signatory	Name and surname	Telephone number	Original signature	Date
The person who completed the WSP/ATR				
Designated employee representative				

AUTHORISATION

F2: CEO/Managing Director				
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