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 74-78 Marshall Street, Marshalltown,
 Johannesburg
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APPLICATION TO EXTEND A LEARNING PROGRAMME AGREEMENT CONTRACT

Training Provider / Employer Name: _____

We the undersigned hereby request that the following Learner's Learning Programme Agreement contract be extended.

Details are as follows:

Learner Initials and Surname : _____

Learner ID Number : **Complete ID Number in the box provided below -**

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Learnership Code (*Starting with 16Q*) : _____

Learnership Agreement Number : _____

Commencement Date : _____

Initial Completion Date : _____

Extended to / New Completion Date (*Date in full*) : _____

Reason for extension : **PLEASE TICK ONE OF THE REASON BELOW -**

Programme not completed and the contract is about to expire / has expired		Learner failed his/her assessment attempt	
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NB: Please attach relevant supporting documentation (e.g. Official Extension letter, Training Plan, etc)

Learner Signature

Date

Employer / Provider Signature

Date

FOR MQA OFFICE USE:

APPROVED	
YES	NO

LP Official Name & Signature

Date

Document Number: MQA/LP/04/007
 Revision : 0
 issue Date: 29/09/2010