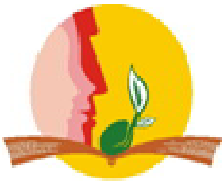


# SACE

South African Council for Educators  
Private Bag X127 Centurion 0046  
Tel: (012) 663 9517

[E-Mail: info@sace.org.za](mailto:info@sace.org.za) (For Enquiries only)



## APPLICATION FORM

### INFORMATION FIELDS SECTION

FOR OFFICIAL USE ONLY!!						
PAY METHOD					STATUS	
PERS	PO	CH	CA	N	Complete	
					Incomplete	

Surname:

Maiden name:

First name(s):

Title:

Date of birth: 

Y	Y	M	M	D	D
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

 Gender [Male (m) / Female (f)]

Identity number:

Postal address:

Postal code:

Residential address:

Postal code:

**NB. It is the duty of every registered member to inform Council of any change in information supplied (e.g. Address, status, qualification, etc.)**

Employee reference (eg. Persal number):

Paypoint number:

Name of school/institution:

Address of school/institution:

Postal code:

Type of institution (eg. Public school, Independent school, Further Education and Training institution,

University, etc.)

Province:

QUALIFICATION	INSTITUTION	YEAR OBTAINED

REQV.   Post Level

**NB. CERTIFIED COPIES OF CERTIFICATES MUST BE ATTACHED.**

Language preference (eg. English)

**Are you at the time of applying for registration, or were you previously, subject to:**

- (i) Any disciplinary proceeding instituted by an employer? YES  NO
- (ii) Any legal proceedings by a competent authority? YES  NO

If yes, supply details: \_\_\_\_\_

**DECLARATION SECTION**

I hereby apply for membership of SACE and authorize you to enter my name in the register with immediate effect. I declare that the information on this application form is true and correct. I declare that I ascribe to the SACE Code of Ethics, and that I will promote the status of the profession as required by the Code of Ethics.

Find enclosed a postal order for R200, 00 in favour of SACE, for South African Nationals, and R400, 00 for foreign nationals

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact number /s (Cell): \_\_\_\_\_ (Work): \_\_\_\_\_

**NOTE:**

- 1. Do not send cash.
- 2. Put your completed application form, certified copies of professional qualifications and identity document, in an envelope and mail it to the above-mentioned address. NB. Do not fax or e-mail any application documents.
- 3. All foreign qualifications must be evaluated by the relevant Quality Assurance bodies before submission.