



N.B.C.E.I

National Bargaining Council For The
Electrical Industry Of South Africa

APPLICATION FOR REGISTRATION OF AN ELCONOP 2

APPLICATION IN TERMS OF CLAUSE 35 OF THE MAIN AGREEMENT

1. To be completed by employer

REG. NO. _____

Name of employer: _____

Postal address: _____

Postal code: _____ Tel. no. _____

2. Details of person for whom application is made

Surname: _____ (applicant)

First names: _____

Residential address _____

_____ Postal code: _____

ID Number: _____

Period of employment: From _____ To date _____

Two passport size photographs attached in respect of the above employee. (NOTE: One photograph to be certified on the back by a Commissioner of Oaths)

3. Undertaking by employer or his authorized representative:

- 3.1 The applicant shall be permitted to undergo compulsory prescribed formal training arranged by the Employer at an Institutionalized training centre accredited by the appropriate "SETA".
- 3.2 The applicant shall undergo a prescribed examination by examiners accredited by the Appropriate "SETA".
- 3.3 I regard myself, as employer, to be bound by the procedures laid down in the Main Agreement.
- 3.4 I will comply with any other requirements laid down by the Council.
- 3.5 I enclose the registration fee of R20,00.
- 3.6 I enclose a certified photograph of the applicant.

I CERTIFY THAT THE INFORMATION GIVEN IN THIS FORM IS TRUE AND CORRECT.

SIGNATURE OF EMPLOYER

DATE

4. To be completed by employee

- 4.1 I am the employee referred to above and undertake to abide by the conditions laid down and certify that the information provided is true and correct.

SIGNATURE OF EMPLOYEE

DATE

Please enclose a certified copy of the employee's ID Document