**COMPANY DECLARATION OF INTEREST**

**Name of Company : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Company Representative : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of learners hosted : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contractual period with learners : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Nature of Interest declared, (if any) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Brief description of the interest declared:**

 **Declarations with respect to Learners:**

□ All Learners are South African citizens between the Ages of **18 - 34 years** old, residing in the Western Cape and have been verified by the company;

□ All Learners were **Unemployed** and not employed on a contract/fixed term/permanent or otherwise before this event and have been verified by the company;

□ All Learners have previously not been involved in any other funded **DEDAT** placement programme;

□ All Learners have not been involved in any other learnership/internship funded placement programme **at the same company** within the last 6 (six) months;

**Declarations with respect to Company:**

□ The Company has **sufficient mentorship capacity and resources** in place to conducively host each learner being placed;

□ The Company is not aware of any conflicting interest in any activity of the beneficiaries/ Learners on the attached learner list other than declared above; Such as close family relationships or similar;

□ We are not a Temporary Employment Services Agency nor does the Company charge placement fees.

□ The Company will not make deductions from the learner without proper consultation with DEDAT.

**I hereby certify that the information furnished above is true and complete to the best of my knowledge and I accept that the Provincial Government Western Cape may act against me in terms the of relevant policies and laws should this declaration prove to be false.**

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 **(Signature of Company Rep.) (Date)**