

# ISS Training Academy – Training Registration Form

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Use this form to apply or register interest for training. You may complete this form and submit it together with supporting documents.

Submission (temporary): Email your completed form and supporting documents to [contact@tsdg.co.za](mailto:contact@tsdg.co.za). If requested, documents may also be uploaded via the online registration page.

## A) Applicant Details

Full name: \_\_\_\_\_  
ID / Passport number: \_\_\_\_\_  
Date of birth (YYYY-MM-DD): \_\_\_\_\_  
Phone number: \_\_\_\_\_  
Email address: \_\_\_\_\_  
Preferred contact method (Call / Email / WhatsApp): \_\_\_\_\_

## B) Location Selection

Preferred training location (Johannesburg / Western Cape / Northern Cape): \_\_\_\_\_  
If Northern Cape: (Kimberley / De Aar): \_\_\_\_\_

## C) Training Selection

Course category: \_\_\_\_\_  
Course (name / code if known): \_\_\_\_\_  
Intended start timeframe (ASAP / This month / Next month / This quarter): \_\_\_\_\_  
Experience level (Entry-level / Working / Supervisor / Management / Executive): \_\_\_\_\_

## D) Additional Information

Anything we should know? (goals, current role, questions)

# ISS Training Academy – Training Registration Form (continued)

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## E) Document Checklist (attach where applicable)

- Copy of ID document (Required)
- Proof of address (Optional)
- PSIRA certificate / card (Optional)
- Prior training certificates (Optional – attach all relevant)
- CV (Optional)

## F) Declarations (Required)

- I consent to the processing of my information for training administration and verification (POPIA).
- I confirm the information and documents provided are accurate to the best of my knowledge.
- I understand training is subject to verification, prerequisites, and availability of dates.

## G) Submission

Email this completed form and supporting documents to: [contact@tsdg.co.za](mailto:contact@tsdg.co.za)

Use this subject line format: ISS Training Registration – <Full Name> – <Course/Category>

## H) For Office Use (Do not complete)

Received date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

Prerequisites confirmed: \_\_\_\_\_

Training date offered: \_\_\_\_\_

Outcome / next steps: \_\_\_\_\_