



SOUTH AFRICAN INSTITUTE OF DRAUGHTING®

Non Profit Company (2016 / 027567 / 08)

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APPLICATION FOR MEMBERSHIP ~ STUDENT

To be completed in **CAPITAL LETTERS** and **BLACK** colour only, with reference to Check List

1. PERSONAL DETAILS												
Title - Mr/Mrs/Ms						Surname						
First Names												
I D Number					Passport No.				Country			
Race Profile	W	C	I	B	O	Gender	F	M	Date of Birth	/	/	Age
Residential Address												
Town								City				
Postal Code					Province							
Postal Address												
Town								City				
Postal Code					Province							
Mobile						eMail						
Name - Employer / Business												
Postal Address												
Town								City				
Postal Code					Province							
Telephone						eMail						

2. DECLARATION	
Declaration by Applicant	Commissioner of Oaths Stamp
<p><i>I declare, under oath, that all the information submitted by me in support of this Application is true and correct and is binding on my conscience</i></p> <p><i>I undertake to comply with the Constitution, to promote the interests of the Institute, maintain its good name and adhere to its Code of Conduct</i></p> <p><i>My Membership Certificate shall be returned to the SAID upon resignation from the Institute or termination of my membership</i></p> <p><i>On resignation from the Institute, I undertake to pay all Fees due until the SAID receives written notice of my resignation and my Membership Certificate</i></p>	
Signature of Applicant	Commissioner of Oaths
Date	

FOR OFFICE USE ONLY			
Date Application Received	/	/ 2019	Membership Registration # S 19
Grade	STUDENT MEMBER		Category
Assessment Officer		Date Certificate Issued	/ / 2019

3. EDUCATION (highest qualifications for EACH category)

Educational Category	Educational Institution	Examination / Course (Senior Cert / Grade 12 / NQF 4, Diploma, etc.)	Year Passed
Secondary School			
College			
University			
Draughting College			
Present Studies			

4. EMPLOYMENT

Employer	Position Held	From: Date Day/Month/Year	To: Date Day/Month/Year



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CHECK LIST

Name

Signed Date

The following documents, *not bound in book form or stapled together*, are required for Membership Registration

Refer to 2. Declaration on page 1 of Application form - must be SIGNED, DATED and STAMPED by a COMMISSIONER OF OATHS

- All documents must be **CERTIFIED COPIES** of the original documents
- All required documents to be ticked (✓) off on list below and sent by REGISTERED POST or COURIER only - no electronic documents will be accepted

Document(s)		FOR OFFICE USE ONLY			
		Date Received	Included		Documentation Notes
<i>Tick (✓) Document(s) sent</i>	✓		Yes	No	
Application Form Complete in CAPITAL LETTERS and BLACK colour only Sign and date in the presence of a Commissioner of Oaths					
Identification Document or valid Passport South African applicants to submit identity document or identity card Foreign applicants to submit current passport (<i>not expiring within six (6) months</i>) Include ALL pages with entry / departure stamps and visas / permits ❖ A driving licence will not be accepted					
Employment Letter(s) of Reference / Certificate(s) of Service issued by Current Employer and Previous Employers, on company stationery Name of employer, postal address, position, start date to end date (months and years), duties undertaken, reason for leaving					Previous
					Current
(Self Employed) Owner of Business / Partner All documentation of business registration required - (Pty) Ltd / cc					
Letter of Registration / Student Card Official documentation or student card issued by college or institution where applicant is currently studying					
School Certificate / Statement of Results Secondary School Certificate(s) Statement of Results only accepted until school certificate has been issued by relevant authority Full names, name of school attended, subjects, highest grade and year passed					
Proof of Payment	SAID Registration Fee	/ / 2019			
	SAID Membership Fee	/ / 2019			