

Date

FACULTY OF ENGINEERING & TECHNOLOGY WORK INTEGRATED LEARNING (WIL) REGISTRATION

Electronic Engineering -Course code: 208083



STUDENT INFORMATION: Sponsored by: SETA / NSFAS / Bursary / Other Student Number Name Surname F Gender (Please Tick) Μ Home address Postal address Contact number **Email address SITE ADDRESS (IF APPLICABLE): PLACEMENT DETAILS:** Company Name Company Address Company Contact Number **MENTOR DETAILS:** Mentor Name Mentor Address Mentor Contact Number Mentor Email Address Mentor Qualification **ECSA** registered YES NO **ECSA REG NO** SUPERVISOR DETAILS: Mentor Name Mentor Address **Mentor Contact Number** Mentor Email Address Mentor Qualification **ECSA** registered YES NO **ECSA REG NO WIL DURATION:** From (start) To (finish) WLL SUBJECT: (PLEASE TICK WIL SUBJECT THAT YOU ARE REGISTERING FOR) EAEXP2A **Electronic Engineering EAEXPIA Student Signature UNIVERSITY APPROVAL:** Signature of WIL Coordinator **Approved STAMP**

Declined