

Date

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

**Industrial Engineering -**Course code: 208085



## **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) WIL SUBJECT: (PLEASE TICK WIL SUBJECT THAT YOU ARE REGISTERING FOR) EBEXP2A **Industrial Engineering EBEXP1A Student Signature UNIVERSITY APPROVAL:** Signature of WIL Coordinator **Approved STAMP**

Declined