



Application for ISP/Internet Café training course

1. General information section

Full name: (Mr, Mrs, Ms) _____

Company name (if currently employed): _____

Tel: () _____ Email address: _____
Code (Number most likely to be contacted on)

Fax: () _____ Any other Tel number: _____

2. Education and skills section:

What level did you reach at school (indicate grade)? _____

Are you able to operate a computer? [] YES [] NO

How much experience have you had in working on a computer? – provided estimated number of days, weeks, years? _____

Do you currently have access to a computer? [] YES [] NO

If you have a tertiary (post matric) education, please feel free to provide details here. Further education is however not necessary for course purposes (this includes diplomas, university degrees etc.):

_____ (add lines as required)

3. Personal section

Please take your time when answering the following section:

Question 1: **What made you decide to apply for this course?**

_____ (add lines as required)

Question 2: **How much time do you have available and are you willing to spend developing and growing your Internet business?**

- Less than 20 hours per week
- Between 20 - 30 hours per week
- Between 30 - 40 hours per week
- Between 40 - 60 hours per week
- In excess of 60 hours per week – whatever it takes!

Question 3: **Do you have a dream or vision for your future? If so, please share this with us very briefly.**

_____ (add lines as required)

Question 4: **Can you tell us in no more than twenty (25) words, why you think ISPA should consider you for this course?**

_____ (add lines as required)

Thank you for completing this form. We will revert to you shortly to advise if your application has been successful.

Please submit your form to:
queries@ispa.org.za or fax to 086 606 4066