

FORM 3A
CERTIFICATE FOR LEARNERS OR STUDENTS TO TRAVEL TO ANOTHER
PROVINCE/METROPOLITAN AREA/DISTRICT
 Regulation 34(5)

Note: This certificate and an identity document/driver's license must be in the possession of the learner / student to whom this certificate is issued

I,

Full Names			
Surname			
Identity Number			
Name of school/institution			
Address of school/institution			
Province of school/institution			
Metropolitan area/district of school/institution			
Contact details	Cell nr.	Tel Nr(W)	e-mail address

In my capacity as *Head/delegated person of the above-mentioned *school/institution, hereby declare that the undermentioned *learner/student is a *learner/student at this *school/institution, and needs to travel between different *provinces/metropolitan areas/districts for education

Full names of learner /student:			
Surname of learner /student:			
Residential address:			
Province of residence:			
Metropolitan area /district of residence:			
Full names of primary caregiver:			
Contact details of primary caregiver:	Cell nr.	Tel Nr(W)	e-mail address

Signed at _____ on this _____ day of _____ 2020

 Head/delegated person of *school/institution

