

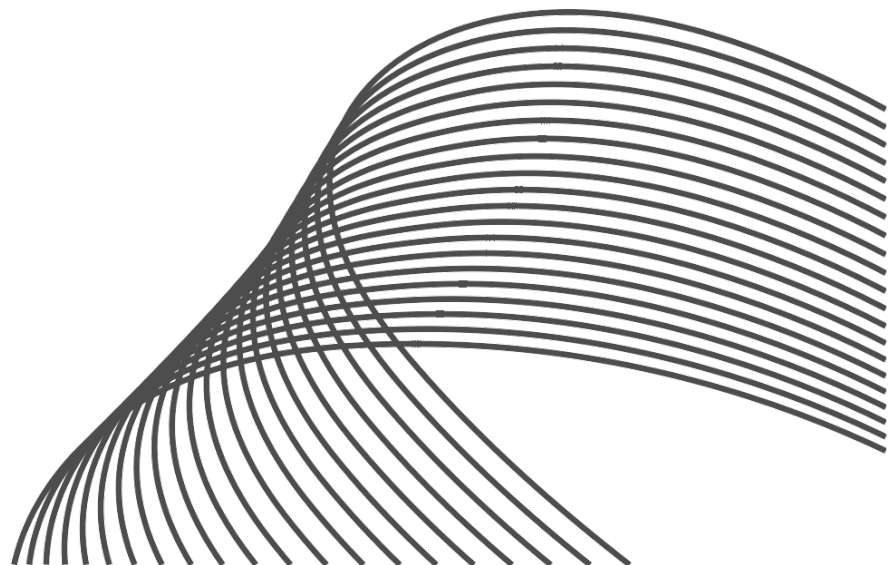


SOUTH AFRICAN
INSTITUTE OF STOCKBROKERS

External Integrated Summative Assessment (EISA)

Registration Form

Occupational Certificate: Financial Markets Practitioner SAQA ID: 117238



1. INTRODUCTION

The South African Institute of Stockbrokers (SAIS) is the professional body for stockbrokers and other financial markets professionals. It not only represents members but is also the industry representative. The role of the SAIS is to set and maintain the qualification standards for stockbrokers and other financial markets professionals. Ensuring that professionals have the requisite knowledge and skills is a further aim, as is ensuring that, knowledge and skills remain current and relevant. The guiding principles of the SAIS are:

- Protect the public.
- Maintain public confidence in the profession, and
- Uphold proper standards of conduct in the profession.

The SAIS is committed to the transformation of the Financial Markets Industry, both demographically and from a regulatory perspective. This commitment to transformation will contribute to a more just and equitable environment. This is accomplished through membership categories and multiple designations.

1.1 Occupational Certificate: Financial Markets Practitioner (SAQA ID: 117238)

The Occupational Certificate: Financial Markets Practitioner (OC: FMP) is aimed at providing learners with entry-level knowledge, practical skills, and experience in key functions in the financial markets. The FMP qualification consists of three components:

- Knowledge.
- Practical Skills; and
- Work Experience.

The Work Experience component focuses on providing the learner with the opportunity to acquire context, knowledge, and exposure to the work environment.

1.2 The Role of the SAIS

The SAIS is the Assessment Quality Partner (AQP) for the OC: FMP. As such, it is responsible for setting the External Integrated Summative Assessment (EISA). The EISA is a cumulative examination that integrates the theory, practical and work experience components.

Please note that the EISA consists of two (2) examination papers. For a successful EISA, both examinations need to be completed with a pass mark of 50% obtained for each examination. Should a learner obtain a pass for only one (1) of the examinations, that pass will be held in credit until the following examination session.

Should the learner elect not to write in the following examination session or fail again, the credit will fall away and both examinations must be re-attempted.

2. IMPORTANT INFORMATION

- a. All candidates must complete sections A, B or C, D and E.
- b. All candidates seeking entry to the EISA through Recognition of Prior Learning (RPL) must complete sections A, C and D.
- c. An examination number will only be issued once payment for the EISA has been received.
- d. An accredited Skills Development Provider is one that has been accredited by the QCTO to deliver the OC: FMP (SAQA ID: 117238).
- e. An accredited workplace is a workplace that has been accredited by the AQP to deliver the workplace component of the OC: FMP (SAQA ID: 117238).
- f. Completed EISA registration forms (and supporting documents) and any related queries must be submitted via email to Valencia at valencia@sais.co.za.
- g. All submissions will be evaluated within 4 weeks of receipt of a completed application.
- h. The closing date for applications is 6 weeks before the EISA examination date.

SECTION A: PERSONAL INFORMATION

| | | | | | | | | | | | | | | | |
|--------------------------------------|---|-------|---|---|---|---|---|---|---|--|--|--|--|--|--|
| Title | <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Other (please specify) _____ | | | | | | | | | | | | | | |
| Surname | _____ | | | | | | | | | | | | | | |
| First name(s) | _____ | | | | | | | | | | | | | | |
| Middle name(s) | _____ | | | | | | | | | | | | | | |
| Initials | _____ | | | | | | | | | | | | | | |
| Date of birth | <table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> </table> | D | D | M | M | Y | Y | Y | Y | | | | | | |
| D | D | M | M | Y | Y | Y | Y | | | | | | | | |
| Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female <table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| ID number (RSA citizens only) | _____ | | | | | | | | | | | | | | |
| Non-South African Citizens | <i>Nationality</i> | _____ | | | | | | | | | | | | | |
| | <i>ID type</i> | _____ | | | | | | | | | | | | | |
| <i>ID number</i> | _____ | | | | | | | | | | | | | | |
| Telephone number (personal) | _____ | | | | | | | | | | | | | | |
| Telephone number (work) | _____ | | | | | | | | | | | | | | |
| Cellular number | _____ | | | | | | | | | | | | | | |
| Email address (personal) | _____ | | | | | | | | | | | | | | |
| Email address (work) | _____ | | | | | | | | | | | | | | |
| Race | <input type="checkbox"/> African <input type="checkbox"/> Coloured <input type="checkbox"/> Indian <input type="checkbox"/> White <input type="checkbox"/> Other (please specify) _____ | | | | | | | | | | | | | | |
| Home language | <input type="checkbox"/> Afrikaans <input type="checkbox"/> English <input type="checkbox"/> IsiNdebele <input type="checkbox"/> IsiXhosa <input type="checkbox"/> IsiZulu <input type="checkbox"/> Sepedi <input type="checkbox"/> Sesotho <input type="checkbox"/> Setswana <input type="checkbox"/> Siswati <input type="checkbox"/> Tshivenda <input type="checkbox"/> Xitsonga <input type="checkbox"/> Other (please specify) _____ | | | | | | | | | | | | | | |

Physical Address

Address line 1

Address line 2

Address line 3

Postal code

Municipality

Province

Is this an urban or rural area?

Urban

Rural

Postal Address

Address line 1

Address line 2

Address line 3

Postal code

Municipality

Province

Is this an urban or rural area?

Urban

Rural

Do you have a disability as contemplated by the Employment Equity Act?

Yes

No

If yes, please provide details regarding your disability, *where*:

1 = No difficulty

2 = Some difficulty

3 = A lot of difficulty

4 = Cannot do at all 5 = Don't know

| | 1 | 2 | 3 | 4 | 5 | 6 |
|---------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Seeing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hearing | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Communicating | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Walking | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Remembering | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self-care | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please provide the following details in relation to your Grade 12 (matric) certificate

Year in which you passed Grade 12

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
|---|---|---|---|

School at which you passed Grade 12

City/ town in which this school is situated

Is this an urban or rural area?

Urban

Rural

Highest qualification obtained after Grade 12

Any other professional designations

| Professional Body | Designation | Years of membership |
|-------------------|-------------|---------------------|
| | | |
| | | |
| | | |

SECTION B: REGISTRATION CRITERIA

An eligible learner is one who has successfully completed the Knowledge and Practical Skills components of the qualification at an accredited Skills Development Provider (SDP).

Eligible learners wishing to write the EISA must please supply the documentation listed below and complete section A:

- Certified copy of identity document.
- Certified copy of Statement of Results; and
- Certified copy of Statement of Work Experience.

OR

SECTION C: RECOGNITION OF PRIOR LEARNING (RPL)

Candidates applying for the EISA through an RPL process must please supply the documentation listed below and complete section A:

- Certified copy(ies) of the RPL assessment outcome for the qualification's Knowledge and Practical Skills components (from the accredited SDP).
- Certified copy(ies) of the RPL assessment outcome for the Work Experience component (from the accredited workplace) of the qualification.

SECTION C: BILLING INFORMATION

After submitting your registration, you will be sent an invoice. Send payment proof to Valencia at valencia@sais.co.za. Please keep in mind that your registration will not be considered complete until this proof of payment is received and confirmed.

EMPLOYER / COMPANY / PERSON RESPONSIBLE FOR PAYMENT

Employer / Company Name _____

VAT Number _____

Contact Person _____

Email Address _____

Postal/Business Address _____

Code _____

Tel Number _____

Cell Number _____

SECTION D: DECLARATION

Learner Declaration

I _____ (name) confirm that the information supplied in this application, is to the best of my knowledge, true and correct.

I agree that:

1. Should I, at any time, become aware that any of the information in this application is incorrect or has materially changed, I will notify the SAIS immediately.
2. If the information in this application is incorrect, it may invalidate the application and invalidate any decision that the SAIS may have reached based on this application.
3. The SAIS is entitled to suspend my entrance to the EISA while an investigation is held in terms of my eligibility to write the EISA.
4. I may be subject to disciplinary action by the SAIS in respect of incorrect or false information provided in this application.
5. The Learner is aware of the fact and hereby consents:
 - 5.1 to the collection of their personal information by the SAIS including information relating to their Learnership, activities and related activities as a Learner.
 - 5.2 to the lawful processing of such personal information by the SAIS to the extent that such processing relates to the attainment of the objects of the SAIS, as required by the Quality Council for Trades and Occupations (QCTO).
 - 5.3 that his/her personal information may be stored on web servers hosted by independent third parties, whether in the cloud or in South Africa or internationally.
 - 5.4 that the SAIS shall be entitled, without limitation, to communicate the personal information of the Learner to the South African Qualifications Authority (SAQA) to the extent that such information may be required in terms of the National Qualifications Framework Act, as amended from time to time, and/or a Quality Council and/or exchanges and/or employers and/or employment agencies and/or any third party where the SAIS deems it necessary to do so in giving effect to the interest of the Learners and/or the objects of the AQP;
 - 5.5 thereto that the SAIS shall be always entitled to direct correspondence to the Learner by way of electronic communication, or such other means of communication as the SAIS may require and the Learner hereby consents to receive such correspondence on matters concerning the Learner's Learnership.
 - 5.6 the SAIS shall be entitled to share the Learner's personal information with any of its associated partners who are essential to the Learnership process and to give effect to the objects of the SAIS as the AQP.
 - 5.7 that the SAIS shall be entitled to subcontract any function to a third-party service provider/s and to this end the SAIS shall be entitled to provide access for a third-party service provider/s to access the Learner's personal information as contained on the SAIS's database.
 - 5.8 thereto that the SAIS shall be entitled to retain the Learner's records in perpetuity, to enable the SAIS to carry out its functions / achieve its objectives and to meet any regulatory requirements. This will not apply should the Learner, at any time, request that his/her personal information be corrected, in terms of the provisions of the Protection of Personal Information Act No. 4 of 2013.
6. I understand that withholding of or failure to disclose personal information will result in the SAIS being unable to perform its function and /or services or benefits as I may require from the SAIS as the AQP.
7. I understand that I will not hold SAIS responsible for any improper or unauthorised use of personal information that is beyond its reasonable control.

Learner name

Learner ID number

Learner signature

Date of Signature