

APPLICATION FORM: PRESIDENTIAL EMPLOYMENT INITIATIVE PROGRAMME (PEP) - SAVING JOBS Annexure I-A

School details																																																																		
EMIS Number of the Institution	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> <tr> <td style="width: 60%;">District Office</td> <td colspan="6" style="text-align: center;">Mark with "X"</td> <td style="width: 5%;">SK</td> <td style="width: 5%;">OB</td> <td style="width: 5%;">CW</td> <td style="width: 5%;">WC</td> <td style="width: 5%;">MEE D</td> <td style="width: 5%;">MSE D</td> <td style="width: 5%;">MC ED</td> <td style="width: 5%;">MN ED</td> </tr> <tr> <td>Institution Name</td> <td colspan="12" style="height: 20px;"></td> </tr> <tr> <td>Principal of the Institution</td> <td colspan="12" style="height: 20px;"></td> </tr> </table>																									District Office	Mark with "X"						SK	OB	CW	WC	MEE D	MSE D	MC ED	MN ED	Institution Name													Principal of the Institution												
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Financial information																									
Total 2020 <u>annual</u> own income budget (excl any income received from Government)	Rands only	R	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																						
Total 2020 <u>annual</u> budget (total cost to institution) for Affected posts	Rands only	R	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																						
Document required: 2020 Approved budget attached	Mark with "X"										YES														
<u>Actual own income received</u> for the period 1 Jan 2020 till 30 September 2020.	Rands only	R	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																						
<u>Actual amount paid for Affected posts</u> for the period 1 Jan 2020 till 30 September 2020.	Rands only	R	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																						
Document required: Proof of own income received and Affected salaries paid for the period 1 Jan till 30 Sept 2020.	Mark with "X"										YES														
Number of Affected posts on November 2020 payroll, excl Gr R Affected posts	Number of SGB posts - Nov 2020																								
Total Affected payroll for November 2020 , excl Gr R Affected posts	Rands only	R	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td><td style="width: 10%;"></td> </tr> </table>																						
Document required: List of names in Affected posts applied for as well as total cost per Affected post for Nov 2020.	Mark with "X"										YES														
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Declaration																
<p>I, the principal of this institution, hereby declare that information provided is correct and that all requested documents in support of this application have been attached.</p> <p>I, the principal of this institution, understand that the submission of incorrect information or an incomplete application may disqualify my application.</p> <p>I, the principal of this institution, understand that the above application is subject to approval and available funding.</p>																
Signature:																
Date:	School Stamp				Affected Chairperson											
									D	D	M	M	2	0	2	0