Government Notice

MINISTRY OF LABOUR AND SOCIAL WELFARE

No. 215 2010

SOCIAL SECURITY DEVELOPMENT FUND REGULATIONS:
SOCIAL SECURITY ACT, 1994

Under section 47 of the Social Security Act, 1994 (Act No 34 of 1994), and on the recommendation of the Social Security Commission, I have made the regulations set out in the Schedule.

E. NGATJIZEKO
MINISTER OF LABOUR AND SOCIAL WELFARE

Windhoek, 2 September 2010

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PART 1
PRELIMINARY

Definitions

1. In these regulations any word or expression to which a meaning has been assigned in the Act has the same meaning, and unless the context indicates otherwise -

“development agency” includes any institution registered under regulation 13 which offers employment schemes undertaken for the benefit of socio-economically disadvantaged unemployed persons in the following categories -
(a) community infrastructure programs;
(b) small rural and urban infrastructure programs;
(c) community development programs;
(d) community-based social services;
(e) labour mobility and retraining programs;
(f) job exposure and employment placement programs;
(g) technical innovation programs for sustainability; or
(h) such other programs as the Commission may from time to time determine for purposes of employment schemes;

“employment scheme” means an employment scheme approved by the President as contemplated in section 37(4)(a) of the Act;

“end-beneficiary” means a person who receives any benefit, grant, aid or advantage of any kind derived from any training scheme or employment scheme or any bursary, loan or other form of financial aid referred to in section 37(4) of the Act;

“Fund” means the Development Fund;

“higher education” means all learning programmes leading to qualifications higher than Grade 12 or its equivalent, and includes tertiary education as contemplated in Article 20(4) of the Namibian Constitution;

“higher education institution” means any technical or academic institution that provides higher education and which has been accredited by the NQA as contemplated in section 13 of the Namibia Qualifications Authority Act, 1996 (Act No. 29 of 1996);

“NQA” means the Namibia Qualifications Authority as defined in section 1 of the Namibia Qualifications Authority Act, 1996;

“NTA” means the Namibia Training Authority as defined in section 1 of the Vocational Education and Training Act, 2008 (Act No. 1 of 2008);

“portfolio Minister” means the Minister responsible for labour and social welfare;

“socio-economically disadvantaged person” means a person contemplated in section 37(4)(a) of the Act;

“student” means any Namibian citizen or other person who is the holder of a permanent residence permit in Namibia who is enrolled at or who wishes to enroll at any higher education institution;

“the Act” means the Social Security Act, 1994 (Act No. 34 of 1994);

“training provider” means a person, institution or organisation who or which -

(a) provides a course of instruction or training which meets the curriculum standards or occupational standards of the NQA;
(b) assesses the performance of persons taking part in such course; and

c) has been accredited by the NQA as contemplated in section 13 of the NQA Act, 1996; or

d) has been accredited by the NTA as contemplated in section 5(3)(b) of the Vocational Education and Training Act, 2008 (Act No. 1 of 2008).

“training scheme” means a training scheme approved by the President as contemplated in section 37(4)(a) of the Act; and

“unemployed”, in relation to any person, means any person without employment who is available for work and looked or did not look for work.

Approval of training and employment schemes

2. (1) The Commission must cause an application to be submitted through the office of the portfolio Minister, to the office of the President, for the approval of training and employment schemes.

(2) The Commission must cause a register to be compiled and kept from the list of training and employment schemes approved by the President.

(3) When a training or employment scheme, ceases to exist, the Commission must inform the portfolio Minister in writing, who in turn must forward such information to the office of the President.

PART 2
TRAINING SCHEMES

Funding of training schemes

3. The Commission may provide financial support, pursuant to written agreement, for training schemes undertaken for the benefit of the socio-economically disadvantaged unemployed by training providers.

Application for registration as training provider

4. (1) Any training provider who wishes to participate in a training scheme must apply in the form of Form 1 to the Commission for registration as training provider on the Register of Training Providers of the Fund, held by the Commission.

(2) The Commission may grant or refuse an application contemplated in subregulation (1), or may refer an application back to the applicant in order to furnish further particulars to the Commission.

(3) The Commission must enter into a written agreement (to be called a “Service Level Agreement”) with every training provider whose application contemplated in subregulation (1) has been granted, and the agreement concerned must at least contain particulars relating to -

(a) the contents of the training scheme concerned;

(b) the quality of services to be offered as part of the training scheme;

(c) the structure of the training scheme concerned;
(d) the monitoring and evaluation mechanisms contained in the training scheme concerned; and

(e) where necessary, the remuneration payable for services rendered and the manner in which it will be paid.

(4) The Commission must record in a register in the form of Form 2, the name and the other relevant particulars set out therein, of every registered training provider.

Certificate of registration as training provider

5. (1) The Commission must issue to every registered training provider a certificate of registration as training provider in the form of Form 3.

(2) A certificate of registration as training provider is valid for a period of three years as from the date of issue thereof.

(3) At the expiry of the period referred to in subregulation (2), the training provider concerned may apply for further registration as training provider as contemplated in regulation 4, provided that the training provider is still accredited with the NQA or the NTA.

(4) If a certificate of registration as training provider has been lost, destroyed or has for any reason become illegible, the training provider concerned may apply to the Commission for a duplicate of such certificate.

(5) If an application under subregulation (4) is made by reason of illegibility of the certificate of registration, the training provider concerned must surrender the original certificate of registration to the Commission for cancellation.

Cancellation of registration as training provider

6. (1) If a registered training provider -

(a) has ceased to be accredited with the NQA or the NTA;

(b) has furnished, or has allowed another person to furnish, information in respect of an application made under regulation 4(1), which is false or misleading, knowing that it is false or misleading;

(c) is not complying with or in breach of the written agreement with the Commission as contemplated in regulation 4(3),

the Commission may cancel, subject to subregulation (2) and by notice in writing to the registered training provider, the registration as training provider.

(2) The Commission may only cancel the registration of a training provider as training provider after the Commission has afforded the training provider concerned an opportunity to be heard by the Commission.

(3) A training provider whose registration as training provider has been cancelled as contemplated in this regulation must return its certificate of registration as training provider to the Commission within a period of one month after it has been cancelled.

(4) A training provider whose registration as training provider has been cancelled as contemplated in this regulation who has not returned its certificate of registration as training provider within the period referred to in subregulation (3), commits an offence and is liable on conviction –
(a)  in the case of a provider that is a natural person, to a fine not exceeding N$2 000 or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment; or

(b)  in the case of a provider that is not a natural person, to a fine not exceeding N$2 000.

Application to participate in training scheme

7.  Any socio-economically disadvantaged Namibian citizen or other person who is the holder of a permanent residence permit in Namibia and who is unemployed, may apply in the form of Form 4 through a registered training provider to the Fund for participation in a training scheme offered by the training provider concerned.

Grant of application and requirement for own contribution

8.  The Commission may grant or refuse an application made under regulation 7, and after granting such an application it may require the end-beneficiary of a training scheme to pay to the Fund the percentage of own contribution of the total cost of training in respect of the training scheme concerned as the Commission may from time to time determine for purposes of this regulation.

Application for funding by training provider

9.  A registered training provider that wishes to apply to the Fund for funding in respect of a training scheme -

(a)  must apply therefor in the form of Form 5; and

(b)  must submit together with that application, proof of payment of the own contribution, if any, referred to in regulation 8 or 10.

Grant of application and requirement for own contribution

10.  The Commission may grant or refuse an application made under regulation 9, and after granting such an application it may require the training provider to pay or provide to the Fund the percentage of own contribution of the total cost of training in respect of the training scheme concerned as the Commission may from time to time determine for purposes of this regulation.

Exemption from providing own contribution

11.  The Commission may exempt, if the Commission is of the opinion that an end-beneficiary referred to in regulation 8 or a training provider referred to in regulation 10 is not able to pay or provide the percentage of own contribution concerned, that end-beneficiary or training provider from paying or providing that own contribution.

PART 3
EMPLOYMENT SCHEMES

Funding of employment schemes

12.  The Commission may provide financial support, pursuant to written agreement, for the projects and programs of employment schemes undertaken for the benefit of the socio-economically disadvantaged unemployed persons by development agencies.
Application for registration as development agency

13. (1) Any institution wishing to participate in an employment scheme as development agency must apply in the form of Form 6 to the Commission for registration to execute projects and programs under employment schemes as contemplated in regulation 12.

(2) The Commission may grant or refuse an application contemplated in subregulation (1), or may refer an application back to the applicant in order to furnish further particulars to the Commission.

(3) The Commission must enter into a written agreement (to be called a “Service Level Agreement”) with every institution whose application contemplated in subregulation (1) has been granted, and the agreement concerned must at least contain particulars relating to -

(a) the number of persons to be assisted and the content of the projects and programs concerned;

(b) the quality of services to be offered as part of the projects and programs concerned;

(c) the structure of the projects and programs concerned; and

(d) the monitoring and evaluation mechanisms contained in the execution of the projects and programs concerned.

(4) The Commission must record in a register in the form of Form 7, the name and the other relevant particulars set out therein, of every registered development agency.

Certificate of registration as a development agency

14. (1) The Commission must issue to every registered institution a certificate of registration as development agency in the form of Form 8.

(2) A certificate of registration as development agency is valid for a period of three years as from the date of issue thereof.

(3) At the expiry of the period referred to in subregulation (2), the development agency concerned may apply for further registration as a development agency as contemplated in regulation 13.

(4) If a certificate of registration as development agency has been lost, destroyed or has for any reason become illegible, the development agency concerned may apply to the Commission for a duplicate of such certificate.

(5) If an application under subregulation (2) is made by reason of illegibility of the certificate of registration, the development agency concerned must surrender the original certificate of registration to the Commission for cancellation.

Cancellation of registration as development agency

15. (1) If a development agency -

(a) has furnished, or has allowed another person to furnish, information in respect of an application made under regulation 13(1), which is false or misleading, knowing that it is false or misleading;
(b) is not complying with or in breach of the written agreement with the Commission as contemplated in regulation 13(3),

the Commission may cancel, subject to subregulation (2) and by notice in writing to the registered development agency, the registration as a development agency.

(2) The Commission may only cancel the registration of a development agency after the Commission has afforded the development agency concerned an opportunity to be heard by the Commission.

(3) A development agency whose registration has been cancelled as contemplated in this regulation must return its certificate of registration as development agency to the Commission within a period of one month after it has been cancelled.

(4) A development agency whose registration has been cancelled as contemplated in this regulation and that has not returned its certificate of registration as a development agency within the period referred to in subregulation (3), commits an offence and is liable on conviction -

(a) in the case of a development agency that is a natural person, to a fine not exceeding N$2 000 or to imprisonment for a period not exceeding six months or to both such fine and such imprisonment; or

(b) in the case of a development agency that is not a natural person, to a fine not exceeding N$2 000.

Application to participate in employment scheme

16. Any socio-economically disadvantaged Namibian citizen or other person who is the holder of a permanent residence permit in Namibia and who is unemployed, may apply in the form of Form 9 through a development agency to the Fund for participation in an employment scheme offered by the development agency concerned.

Grant of application and requirement for own contribution

17. (1) The Commission may grant or refuse an application made under regulation 16, and after granting such an application it may require the end-beneficiary of an employment scheme to pay or provide to the Fund the percentage of own contribution of the total project cost of in respect of the employment scheme concerned as the Commission may from time to time determine for purposes of this regulation.

(2) The own contribution referred to in subregulation (1) must be either in cash or in kind, such as tools, equipment, machinery or land, but excludes labour.

Application for funding by development agency

18. A development agency that wishes to apply to the Fund for funding in respect of an employment scheme -

(a) must apply therefor in the form of Form 10; and

(b) must submit together with that application, proof of payment of the own contribution, if any, referred to in regulation 17 or 19.
Grant of application and requirement for own contribution

19. The Commission may grant or refuse an application made under regulation 18, and after granting such an application it may require the development agency to pay or provide to the Fund the percentage of own contribution of the total project cost in respect of the employment scheme concerned as the Commission may from time to time determine for purposes of this regulation.

Exemption from providing own contribution

20. The Commission may exempt, if the Commission is of the opinion that an end-beneficiary referred to in regulation 17 or a development agency referred to in regulation 19 is not able to pay or provide the percentage of own contribution concerned, that end-beneficiary or development agency from paying that own contribution.

Payment of participants in employment scheme

21. (1) A development agency must pay to every participant in an employment scheme for his or her labour or part thereof as way of an incentive, the amounts as agreed between them.

(2) A development agency may in the determination of the amount of an incentive to be paid to participants as contemplated in subregulation (1), differentiate between participants who are -

(a) school leavers;

(b) retrenched; and

(c) other participants.

PART 4
BURSARIES AND STUDY LOANS

Application for bursary

22. (1) Subject to subregulation (2), any socio-economically disadvantaged student may apply to the Fund in the form of Form 11 for the granting of a bursary in respect of his or her studies towards a first diploma or degree, as the case may be.

(2) An applicant referred to in subregulation (1) must together with the application concerned submit proof of acceptance by the higher education institution concerned.

(3) The Commission may grant as application referred to in subregulation (1) and award the bursary which is in the form of a grant and is non-repayable.

Application for study loans

23. (1) Subject to subregulation (2), any socio-economically disadvantaged student may apply to the Fund in the form of Form 12 for the granting of a study loan in respect of his or her studies towards a first diploma or degree, as the case may be, or in respect of his or her further studies after a first diploma or degree, as the case may be.

(2) An applicant referred to in subregulation (1) must together with the application concerned submit proof of acceptance by the higher education institution concerned.

(3) Then Commission may grant a loan application made in terms of subregulation (1) and must determine the conditions for repayment of the loan to the Fund and to that end may enter into a written agreement with the applicant.
ANNEXURE

FORM 1

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: The Executive Officer
Social Security Commission
Private Bag 13223
WINDHOEK

APPLICATION FOR REGISTRATION AS TRAINING PROVIDER
(Regulation 4(1))
(TO BE COMPLETED IN BLOCK LETTERS)

1. Surname/Name of business: ............................................................

2. First names (if applicable): ............................................................

4. Residential address (if applicable): ................................................

5. Postal address: ..........................................................................

6. Business address: ....................................................................

7. Tel. number (............) ...................................... Fax number (............) ................................

8. E-mail address: ........................................................................

9. Type of training to be offered: (Mark with an “X”)
   (a) Entrepreneurship training:
       Motivational ..................... Business Management and Training ............... 
   (b) Technical training:
       Refresher ......................... Job placement ............ Skill-Upgrading .............
   (c) Institutional capacity building:
       Administrative capacity ...... Development ........

10. Course content (Supply full details of content each course to be offered on separate sheet of paper)

11. Venue where training will be offered: ........................................

I, ..............................................................................................................
    (full names and surname) hereby declare that the above-mentioned particulars are true and correct.

........................................................................................................
........................................................................................................
APPLICANT DATE
FORM 2

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

REGISTER OF REGISTERED TRAINING PROVIDERS
(Regulation 4(4))

<table>
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<tr>
<th>Registration no.</th>
<th>Name of training provider</th>
<th>Type of training offered</th>
<th>Date of registration</th>
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FORM 3

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

CERTIFICATE OF REGISTRATION AS TRAINING PROVIDER
(Regulation 5(1))

..................................................................................................................................................
(FULL NAMES/NAME OF BUSINESS)

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(POSTAL ADDRESS)

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(BUSINESS ADDRESS)

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(DATE OF REGISTRATION)

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..................................................................................................................................................
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(TYPE OF TRAINING OFFERED)

..................................................................................................................................................
EXECUTIVE OFFICER DATE
TO:  .................................................................................................................................
.................................................................    .......................................................  
APPLICANT        DATE

APPLICATION FOR PARTICIPATION IN TRAINING SCHEME
(Regulation 7)

(TO BE COMPLETED IN BLOCK LETTERS)

1. Name of applicant: ..............................................................................................................
2. Postal address: .....................................................................................................................
3. Residential address: .............................................................................................................
5. Place of birth: ......................................... Passport number (if applicable): ....................
6. Tel. number (.............) ..................................... Fax number (.............) ..........................
7. E-mail address: ..................................................................................................................
8. Type of training in which participation is required:
   (a) Entrepreneurship training:
       Motivational .................  Business Management and Training .................
   (b) Technical training:
       Refresher .............. Job placement .................  Skill-Upgrading ..............
   (c) Institutional capacity building:
       Administrative capacity ..............................  Development .................
9. Period of unemployment: ..................................................................................................
10. Are you trained or qualified in any occupation? Yes: ...................       No: ....................
11. If “Yes”, in which occupation? ........................................................................................
    ...........................................................................................................................................
State also your -
   (a) qualification (if applicable): ........................................................................................
    ...........................................................................................................................................
   (b) period of experience: (if applicable): ..........................................................................
   ...........................................................................................................................................
12. Name and address of last employer (if applicable): ..........................................................
    .............................................................................................................................................
I, ........................................................................................................................................
(full names and surname) hereby declare that the above-mentioned particulars are true and correct.
FORM 5

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: The Executive Officer
Social Security Commission
Private Bag 13223
WINDHOEK

APPLICATION BY TRAINING PROVIDER FOR FUNDING OF TRAINING SCHEME
BY THE DEVELOPMENT FUND
(Regulation 9)

(TO BE COMPLETED IN BLOCK LETTERS)

1. Name of training provider: .................................................................

2. Postal address: ...................................................................................

3. Residential address: ...........................................................................

4. Tel. number (.........) ..................................... Fax number (.........) ..............

5. E-mail address: ..................................................................................

6. Type of training to be offered:
   (a) Entrepreneurship training:
       Motivational ................ Business Management and Training ............
   (b) Technical training:
       Refresher ............ Job placement ............ Skill-Upgrading ............
   (c) Institutional capacity building:
       Administrative capacity ................ Development ................

7. Duration of course of training:
   (a) ..................................................................................................
   (b) ..................................................................................................
   (c) ..................................................................................................

8. Number of trainees which can be accommodated at each course:
   (a) ..................................................................................................
   (b) ..................................................................................................
   (c) ..................................................................................................

9. Cost of course per training:
   (a) ..................................................................................................
   (b) ..................................................................................................
   (c) ..................................................................................................

10. Total cost of courses: ........................................................................

11. Amount of funding requested : .........................................................

12. Amount of own contribution:* ........................................................
I, ............................................................................................................................................................
(full names and surname) hereby declare that the above-mentioned particulars are true and correct.

............................................................................................................................................................
............................................................................................................................................................
............................................................................................................................................................

TRAINING PROVIDER                      DATE

* Please attach proof of payment of own contribution.

FOR OFFICIAL USE ONLY

Checked by: .................................................................  Date: .............................................
Remarks: .............................................................................................................................................
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FORM 6

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: The Executive Officer
Social Security Commission
Private Bag 13223
WINDHOEK

APPLICATION FOR REGISTRATION AS DEVELOPMENT AGENCY
(Regulation 13(1))

(TO BE COMPLETED IN BLOCK LETTERS)

1. Surname/Name of business: .................................................................
2. First names (if applicable): .................................................................
4. Residential address (if applicable): ........................................................
5. Postal address: ........................................................................................
6. Business address: ...................................................................................
5. Tel. number (.............) ..................................... Fax number (.............) ..................................
8. E-mail address: ........................................................................................
9. Type of program activities to be offered: (Mark with an “X”)
   (a) Community infrastructure programs ..................... .
   (b) Small rural and urban infrastructure programs ............. .
   (c) Community development programs ..................... .
   (d) Community-based social services ..................... .
   (e) Labour mobility and retraining programs ................. .
   (f) Job exposure and employment placement programs ........... .
   (g) Technical innovation programs for sustainability ........... .
   (h) Such other programs as the Commission may from time to time determine for purposes of employment schemes ........... .
10. Content of program activities (Supply full details of content of each program activity to be offered on separate sheet of paper)
11. Venue where program activities will be offered: ........................................

I, ...................................................................................................................... (full names and surname) hereby declare that the above-mentioned particulars are true and correct.

.................................................................    .......................................................
APPLICANT       DATE
**FORM 7**

**REPUBLIC OF NAMIBIA**

SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

REGISTER OF REGISTERED INTERMEDIARY AGENCY
(Regulation 13(4))

<table>
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<tr>
<th>Registration no.</th>
<th>Name of intermediary agency</th>
<th>Program activities to be offered</th>
<th>Date of registration</th>
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FORM 8

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

CERTIFICATE OF REGISTRATION AS DEVELOPMENT AGENCY
(Regulation 14(1))

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(FULL NAMES/NAMES OF BUSINESS)

...........................................................................
(POSTAL ADDRESS)

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(BUSINESS ADDRESS)

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(DATE OF REGISTRATION)

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(PROGRAM ACTIVITIES OFFERED)

...........................................................................
EXECUTIVE OFFICER

...........................................................................
DATE
FORM 9

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: ................................................................
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................................................................
(Name and address of intermediary agency)

APPLICATION FOR PARTICIPATION IN EMPLOYMENT SCHEME
(Regulation 16)

(TO BE COMPLETED IN BLOCK LETTERS)

1. Name of applicant: ...................................................................................................................
2. Postal address: ..........................................................................................................................
3. Residential address: ..................................................................................................................
5. Place of birth: .............................................. Passport number (if applicable): .................
6. Tel. number (.............) ................................. Fax number (.............) ....................................
7. E-mail address: ........................................................................................................................
8. Type of employment scheme in which participation is required:

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..................................................................................................................................................
..................................................................................................................................................

9. Period of unemployment: ........................................................................................................
10. Are you trained or qualified in any occupation? Yes: ...................          No: ........................
11. If “Yes”, in which occupation? ..............................................................................................

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State also your -
(a) qualification (if applicable): ........................................................................................
..............................................................................................................................................

(b) period of experience: (if applicable): ..........................................................................
..............................................................................................................................................

12. Name and address of last employer (if applicable): ……………………………..

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I, ………………………………………………………………………………………………..
(full names and surname) hereby declare that the above-mentioned particulars are true and correct.

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APPLICANT       DATE
FORM 10

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: The Executive Officer
Social Security Commission
Private Bag 13223
WINDHOEK

APPLICATION BY DEVELOPMENT AGENCY FOR FUNDING OF EMPLOYMENT SCHEME BY THE DEVELOPMENT FUND
(Regulation 18)

(TO BE COMPLETED IN BLOCK LETTERS)

1. Name of intermediary agency: ..................................................................................................
2. Postal address: ...........................................................................................................................
3. Business address: ....................................................................................................................... 
4. Tel. number (............) .................................. Fax number (............) ................................. 
5. E-mail address: ........................................................................................................................ 
6. Type of employment scheme to be conducted: (Provide full details on a separate sheet of paper) 
7. Amount of funding requested: ..................................................................................................
8. Amount of own contribution:* .................................................................................................
9. Number of persons to be involved: ...........................................................................................
10. District where employment scheme is located: ........................................................................ 
11. Name of leader of employment scheme: ................................................................................ 
12. What experience does the leader of the employment scheme have? (Provide full details on 
    separate sheet of paper)
13. Will amount of funding be repaid? Yes: .......................   No: ........................ 
    If “Yes”: (Period: ................. Months) 
    (N$ ................. Per month)

I, ..................................................................................................................................................... 
(full names and surname) hereby declare that the above-mentioned particulars are true and correct.

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APPLICANT       DATE
* Please attached proof of payment of own contribution.

FOR OFFICIAL USE ONLY

Checked by: ............................................................ Date: ............................................
Remarks: .................................................................................................................................
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FORM 11

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: The Executive Officer
Social Security Commission
Private Bag 13223
WINDHOEK

APPLICATION FOR BURSARY
(Regulation 22(1))

1. Surname: ..................................................................................................................................
2. First names: ..............................................................................................................................
3. Date of birth: ........ / ........ / ........ ID number: .................................................................
4. Place of birth: ........................................ Passport number (if applicable): ...........................
5. Residential address: ..............................................................................................................
6. Tel. number (.............) .................................. Fax number (.............) ...............................
7. E-mail address: ........................................................................................................................
8. Study course: ...........................................................................................................................
9. Higher education institution to be attended:* ...........................................................................
   ................................................................................................................................................
10. Years of intended study: ...........................................................................................................
11. Highest educational qualification (attach certified copy of certificate): ...............................
   ................................................................................................................................................
12. References:
   (a) Name: ..........................................................................................................................
   Address: .............................................................................................................................
   Telephone number: ..........................................................................................................
   (b) Name: ..........................................................................................................................
   Address: .............................................................................................................................
   Telephone number: ..........................................................................................................
   (c) Name: ..........................................................................................................................
   Address: .............................................................................................................................
   Telephone number: ..........................................................................................................
13. Envisaged cost of study course: N$ .......................................................................................
14. Where will you be residing? hostel/private accommodation?: ............................................
15. Have you been offered employment once your study has been completed?
   Yes: ............. No:............. If “Yes”: Name of employer: .........................................................
Address: ............................................................................................................................................
Telephone number: ............................................................................................................................
Contact person: ..............................................................................................................................

I, ..........................................................................................................................................................
(full names and surname) hereby declare that the above-mentioned particulars are true and correct.

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APPLICANT        DATE

* Please attach proof of acceptance by the higher education institution concerned.

FOR OFFICIAL USE ONLY

Checked by: ..............................................................    Date: ...................................................
Remarks: ...............................................................................................................................................
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FORM 12

REPUBLIC OF NAMIBIA
SOCIAL SECURITY COMMISSION: DEVELOPMENT FUND
(SOCIAL SECURITY ACT, 1994 (ACT NO. 34 OF 1994))

TO: The Executive Officer
Social Security Commission
Private Bag 13223
WINDHOEK

APPLICATION FOR STUDY LOAN
(Regulation 23(1))

1. Surname: ..................................................................................................................................
2. First names: ..............................................................................................................................
3. Date of birth: ........ /........ /........ ID number: ................................................
4. Place of birth: .......................................... Passport number (if applicable): ....................
5. Postal address: ..........................................................................................................................
6. Residential address ...................................................................................................................
7. Tel. number (............) .................................. Fax number (............) ..............................
8. E-mail address: ..........................................................................................................................
9. Study course: ............................................................................................................................
10. Higher education institution to be attended:* ..........................................................................
11. Years of intended study: .........................................................................................................
12. References:
(a) Name: ..........................................................................................................................
Address: .................................................................................................................................
Telephone number: .............................................................................................................
(b) Name: ..........................................................................................................................
Address: .................................................................................................................................
Telephone number: .............................................................................................................
(c) Name: ..........................................................................................................................
Address: .................................................................................................................................
Telephone number: .............................................................................................................
13. Amount of loan applied for: N$
14. Where will you be residing? hostel/private accommodation?: .............................................
15. Particulars of person who will act as surety for the loan:
Name: .......................................................................................................................................
Telephone number: ............................................................................................................................

16. How do you intend repaying the loan?
   (a) Period: ........................ Months.
   (b) N$ ........................... per month.

I, .................................................................................................................................
(full names and surname) hereby declare that the above-mentioned particulars are true and correct.

.................................................................................................................................  .......................................................  
APPLICANT                DATE

* Please attach proof of acceptance by the higher education institution concerned.

FOR OFFICIAL USE ONLY

Checked by: ........................................  Date: ........................................
Remarks: .........................................................................................................................  
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