



# GOVERNMENT GAZETTE

## OF THE

# REPUBLIC OF NAMIBIA

N\$1.32

WINDHOEK - 6 September 1996

No. 1399

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## Government Notices

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### MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY

No. 233 1996

#### COMMENCEMENT OF THE NATIONAL VOCATIONAL TRAINING ACT, 1994

Under section 54 of the National Vocational Training Act, 1994 (Act 18 of 1994), I hereby determine -

- (a) that Parts I, II, III, IV, V, VI, VII, IX, X and XI of the said Act shall come into operation on 1 September 1996; and
- (b) that Part VIII of the said Act shall come into operation on 1 January 1997.

NAHAS ANGULA  
MINISTER OF HIGHER EDUCATION,  
VOCATIONAL TRAINING, SCIENCE  
AND TECHNOLOGY

Windhoek, 16 August 1996

**MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING,  
SCIENCE AND TECHNOLOGY**

No. 234

1996

**REGULATIONS UNDER THE NATIONAL VOCATIONAL TRAINING  
ACT, 1994**

The Minister of Higher Education, Vocational Training, Science and Technology has, under section 52 of the National Vocational Training Act, 1994 (Act 18 of 1994), made the regulations set out in the Schedule.

The regulations shall come into operation on 1st September 1996.

**SCHEDULE**

**Interpretation**

1. In these regulations, and in the forms in the Annexure, unless the context otherwise indicates, any word or expression to which a meaning has been assigned in the National Vocational Training Act, 1994, shall have the same meaning and -

"the Act" means the said National Vocational Training Act, 1994 (Act 18 of 1994).

**Contracts of apprenticeship**

2. A contract of apprenticeship contemplated in section 19 of the Act shall be in the form of Form 1.

**Transfer of contract of apprenticeship**

3. The transfer of a contract of apprenticeship under section 20 of the Act shall be effected in the form of Form 2.

**Termination of contract of apprenticeship**

4. The notification of the termination of a contract of apprenticeship -

(a) by mutual understanding as contemplated in section 22 of the Act;

(b) during probation as contemplated in section 23 of the Act,

shall be in the form of Form 3 and Form 4, respectively.

**Records of apprentices**

5. The records to be kept of an apprentice in terms of section 25 of the Act shall be in the form of Form 5.

**Particulars of supervisors**

6. The particulars of supervisors contemplated in paragraphs (a) and (b) of section 28(1) of the Act shall be submitted in the form of Form 6.

**Repeal**

7. The regulations made under the Apprenticeship Ordinance, 1938 (Ordinance 12 of 1938), are hereby repealed.

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ANNEXURE



REPUBLIC OF NAMIBIA  
 MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY  
 NATIONAL VOCATIONAL TRAINING ACT, 1994

**CONTRACT OF APPRENTICESHIP**

(Section 19)

TO BE LODGED IN TRIPPLICATE

FOR OFFICIAL USE ONLY REGISTRATION NUMBER: .....
--

APPRENTICE

EMPLOYER

DESIGNATED TRADE:		
SURNAME:		male <input type="checkbox"/>
FIRST NAME:		female <input type="checkbox"/>
DATE OF BIRTH:		
ID-NUMBER:		
NATIONALITY / COUNTRY OF BIRTH:		
POSTAL ADDRESS:		
RESIDENTIAL ADDRESS:		
PARENT'S/GUARDIAN's or DISTRICT MAGISTRATE's NAME: (Only required where the apprentice is a minor)		
POSTAL ADDRESS:		

NAME OF EMPLOYER:		
COMPANY/CLOSE CORPORATION REGISTRATION NUMBER (if any):		
BUSINESS ADDRESS:		
POSTAL ADDRESS:		
	☎	FAX:
PERSON RESPONSIBLE FOR APPRENTICESHIP TRAINING:		

GENERAL CONDITIONS OF SERVICE:

FOR OFFICIAL USE

1. DURATION OF APPRENTICESHIP TRAINING:	Years:	Months:	Date of commencement:	Expiry Date:		
2. WAGES:	First year: N\$.....	Second year: N\$.....	Third year: N\$.....	Fourth year: N\$.....		
3. ORDINARY WORKING HOURS:	Daily: .....hrs	Weekly: .....hrs	Monthly: .....hrs			
4. ANNUAL LEAVE:	First year: .....days	Second year: .....days	Third year: .....days	Fourth year: .....days		

RESPONSIBILITIES OF EMPLOYER:

- To employ the apprentice for the purpose of providing a course of training in order that he or she may achieve the necessary proficiency in his or her trade within the scheduled period as specified by the relevant training scheme.
- To provide the apprentice with sufficient tools, materials and protective clothing necessary for proper training.
- To provide the Chief Inspector of Apprenticeship with an annual progress report on the apprentice.
- To release the apprentice without loss of wages or benefits for the purposes of training at any centre or institution or of attending any test or examination, and to bear all reasonable costs connected thereto.

RESPONSIBILITIES OF APPRENTICE:

- To obey all reasonable instructions given to him or her by his or her employer or any other person designated as his or her supervisor or instructor.
- To work conscientiously.
- To take good care of all tools, machinery and equipment entrusted to him or her and to take every step to avoid damage of machinery or waste of materials.
- To keep confidential any business information he or she may acquire concerning the affairs of the employer.
- Not to absent himself or herself without permission from work or the centre or institute where he or she receives training.
- To refrain from engaging in any activity which interferes with his or her duties and training.

Signed:	.....	.....	.....
	Apprentice ( In case of minors the signature of his or her Parent or Guardian or District Magistrate is also required)	Witness	Date
	.....	.....	.....
	Employer	Witness	Date
THIS CONTRACT IS HEREBY REGISTERED IN TERMS OF SECTION 19 OF THE NATIONAL VOCATIONAL TRAINING ACT, 1994			
	.....	.....	.....
	Chief Inspector of Apprenticeship		Date



REPUBLIC OF NAMIBIA

MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY

NATIONAL VOCATIONAL TRAINING ACT, 1994

TRANSFER OF CONTRACT OF APPRENTICESHIP

(Section 20)

TO BE LODGED IN TRIPPLICATE

FOR OFFICIAL USE ONLY REGISTRATION NUMBER: .....
--

APPRENTICE

EMPLOYER

DESIGNATED TRADE:			NAME OF EMPLOYER:		
SURNAME:		male <input type="checkbox"/>	COMPANY/CLOSE CORPORATION		
FIRST NAME:		female <input type="checkbox"/>	BUSINESS ADDRESS:		
DATE OF BIRTH:			POSTAL ADDRESS:		
ID-NUMBER:				①	FAX:
NATIONALITY / COUNTRY OF BIRTH:			PROSPECTIVE EMPLOYER:		
POSTAL ADDRESS:		①	COMPANY/CLOSE CORPORATION		
RESIDENTIAL ADDRESS:			BUSINESS ADDRESS:		
PARENT'S/GUARDIAN's or (Only required where the apprentice is a minor)		①	POSTAL ADDRESS:	①	FAX:
POSTAL ADDRESS:		①	NATURE OF BUSINESS:		

PARTICULARS OF CONTRACT:		
DATE OF COMMENCEMENT:	DATE OF EXPIRY:	DATE OF REGISTRATION:
REASONS FOR TRANSFER:	5	

In accordance with section 20(1) of the National Vocational Training Act, 1994, the undersigned parties hereby agree to the transferring of the rights and obligations of the present Employer under the Contract of Apprenticeship to the Prospective Employer.

Signed:	.....	.....	.....
	Apprentice	Witness	Date
	(In case of minors the signature of his or her Parent or Guardian or District Magistrate is also required)		
	.....	.....	.....
	Present Employer	Witness	Date
	.....	.....	.....
	Prospective Employer	Witness	Date
I HEREBY APPROVE / DISAPPROVE * THE TRANSFER OF THE CONTRACT OF APPRENTICESHIP	.....	.....	.....
	Chief Inspector of Apprenticeship		Date



**REPUBLIC OF NAMIBIA**  
**MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY**  
**NATIONAL VOCATIONAL TRAINING ACT, 1994**  
**NOTICE OF TERMINATION OF CONTRACT OF APPRENTICESHIP**  
**BY AGREEMENT**

(Section 22)

**APPRENTICE**

**EMPLOYER**

DESIGNATED TRADE:		
SURNAME:		male <input type="checkbox"/>
FIRST NAME:		female <input type="checkbox"/>
DATE OF BIRTH:		
ID-NUMBER:		
NATIONALITY / COUNTRY OF BIRTH:		
POSTAL ADDRESS:		① (HOME)
RESIDENTIAL ADDRESS:		
PARENT'S/GUARDIAN'S or DISTRICT MAGISTRATE'S NAME: <small>(Only required where the apprentice is a minor)</small>		① (HOME)
POSTAL ADDRESS:		① (BUSINESS)

NAME OF EMPLOYER:		
COMPANY/CLOSE CORPORATION REGISTRATION NUMBER (if any):		
BUSINESS ADDRESS:		
POSTAL ADDRESS:		
	①	FAX:

<b>PARTICULARS OF CONTRACT:</b>			
DATE OF COMMENCEMENT:	DATE OF EXPIRY:	DATE OF REGISTRATION:	
REGISTRATION NUMBER:			

In accordance with section 22(1) of the National Vocational Training Act, 1994, the undersigned parties hereby agree that the Contract of Apprenticeship should be terminated with effect from .....

Signed:	.....	.....	.....
	Apprentice	Witness	Date
	<small>(In case of minors the signature of his or her Parent or Guardian or District Magistrate is also required)</small>		
	.....	.....	.....
	Employer	Witness	Date



Form 4

**REPUBLIC OF NAMIBIA**  
**MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY**  
**NATIONAL VOCATIONAL TRAINING ACT, 1994**  
**NOTICE OF TERMINATION OF CONTRACT OF APPRENTICESHIP**  
**DURING PROBATION**  
 (Section 23)

**APPRENTICE**

**EMPLOYER**

DESIGNATED TRADE:			NAME OF EMPLOYER:		
SURNAME:		male <input type="checkbox"/>	COMPANY/CLOSE CORPORATION REGISTRATION NUMBER (if any):		
FIRST NAME:		female <input type="checkbox"/>	BUSINESS ADDRESS:		
DATE OF BIRTH:			POSTAL ADDRESS:		
ID-NUMBER:				①	FAX:
NATIONALITY / COUNTRY OF BIRTH:					
POSTAL ADDRESS:		① (HOME)			
RESIDENTIAL ADDRESS:					
PARENT'S/GUARDIAN'S or DISTRICT MAGISTRATE'S NAME: (Only required where the apprentice is a minor)		① (HOME)			
POSTAL ADDRESS:		① (BUSINESS)			

<b>PARTICULARS OF CONTRACT:</b>		
DATE OF COMMENCEMENT:	DATE OF EXPIRY:	DATE OF REGISTRATION:
REGISTRATION NUMBER:		

In accordance with section 23 of the National Vocational Training Act, 1994, the Contract of Apprenticeship has been terminated by the Employer / Apprentice with effect from .....

Signed:	.....	.....	.....
	Apprentice (In case of minors the signature of his or her Parent or Guardian or District Magistrate is also required)	Witness	Date
	.....	.....	.....
	Employer	Witness	Date

THE CHIEF INSPECTOR'S POSTAL ADDRESS:

Private Bag 19004, Khomasdal, Windhoek





**REPUBLIC OF NAMIBIA**  
**MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY**  
**NATIONAL VOCATIONAL TRAINING ACT, 1994**  
**RECORD OF REMUNERATION PAID TO AND TIME WORKED BY APPRENTICE**  
 (Section 25)

**APPRENTICE**

**EMPLOYER**

DESIGNATED TRADE:			NAME OF EMPLOYER:		
SURNAME:		male <input type="checkbox"/>	COMPANY/CLOSE CORPORATION REGISTRATION NUMBER (if any):		
FIRST NAME:		female <input type="checkbox"/>	BUSINESS ADDRESS:		
DATE OF BIRTH:			POSTAL ADDRESS:		
ID-NUMBER:			①	FAX:	
NATIONALITY / COUNTRY OF BIRTH:					
POSTAL ADDRESS:		① (HOME)			
RESIDENTIAL ADDRESS:					
PARENT'S/GUARDIAN's or DISTRICT MAGISTRATE's NAME: (Only required where the apprentice is a minor)					
POSTAL ADDRESS:		① (BUSINESS)			

<b>PARTICULARS OF CONTRACT:</b>			
DATE OF COMMENCEMENT:	DATE OF EXPIRY:	DATE OF REGISTRATION:	
REGISTRATION NUMBER:			

19.....	Hours worked	Salary (N\$)	Remarks by Supervisor	Supervisor's Signature	Date	Apprentice's Signature	Date
Jan							
Feb							
Mar							
Apr							
May							
June							
July							
Aug							
Sept							
Oct							
Nov							
Dec							





**REPUBLIC OF NAMIBIA**  
**MINISTRY OF HIGHER EDUCATION, VOCATIONAL TRAINING, SCIENCE AND TECHNOLOGY**  
**NATIONAL VOCATIONAL TRAINING ACT, 1994**  
**PARTICULARS OF PERSON RESPONSIBLE FOR SUPERVISING GENERALLY OR**  
**OF APPRENTICE /TRAINEE SUPERVISOR**

(Section 28)

**PERSON RESPONSIBLE FOR SUPERVISING GENERALLY/  
 APPRENTICE/TRAINEE SUPERVISOR**

(delete whichever is not applicable)

**EMPLOYER**

<p>DESIGNATED TRADE: _____</p> <p>SURNAME: _____ male <input type="checkbox"/></p> <p>FIRST NAME: _____ female <input type="checkbox"/></p> <p>DATE OF BIRTH: _____</p> <p>ID-NUMBER: _____</p> <p>NATIONALITY / COUNTRY OF BIRTH: _____</p> <p>POSTAL ADDRESS: _____ ①</p> <p>RESIDENTIAL ADDRESS: _____ (HOME)</p> <p>EMPLOYED AS: _____</p> <p>DATE OF EMPLOYMENT: _____</p>	<p>NAME OF EMPLOYER: _____</p> <p>COMPANY/CLOSE CORPORATION REGISTRATION NUMBER (if any): _____</p> <p>BUSINESS ADDRESS: _____</p> <p>POSTAL ADDRESS: _____</p> <p>① _____ FAX: _____</p> <p>NATURE OF BUSINESS: _____</p>
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**INFORMATION ON PERSON RESPONSIBLE FOR SUPERVISING  
 GENERALLY / APPRENTICE/TRAINEE SUPERVISOR:**

**FOR OFFICIAL USE**

Highest academic qualifications:	
School / Institution:	
Highest technical qualifications:	
Institution:	
Working / teaching experience:	

**Note:** All certificates substantiating the above qualifications, including a CV, should be attached. (If necessary, please attach further particulars per annexure)

<p>Signed: _____</p> <p>THIS APPLICATION IS APPROVED / NOT APPROVED: _____</p>	<p>Employer</p> <p>Chief Inspector of Apprenticeship</p>	<p>Witness</p>	<p>Date</p> <p>Date</p>
--	--	----------------	-------------------------