



**Informal Education: Organisations**

Name of student: \_\_\_\_\_ Scholastic Year: \_\_\_\_\_

Address: \_\_\_\_\_

Member of: \_\_\_\_\_

\_\_\_\_\_

(Name and address of organisation)

\_\_\_\_\_  
Organisation's Stamp

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MQC Registration Number

She / He has been a member of this organisation for  weeks / months / years.

The student has been attending regularly.\*  Yes  No

\*not less than 85% attendance

**Activities which the student actively participated in within the organisation:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ORGANISATION: Declaration Form**

I, \_\_\_\_\_ ID number \_\_\_\_\_, who holds the position of \_\_\_\_\_ within the above mentioned organisation, declare that the information provided above is correct.

\_\_\_\_\_  
Signature

**PARENT/GUARDIAN:**

Name and surname of parent/guardian of student (BLOCK LETTERS)

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
ID Number

The information provided shall be processed in accordance with the provisions of the Data Protection Act (2001) and processed for the purpose(s) of the Secondary School Certificate and Profile.