**“FORM 3A**

**CERTIFICATE FOR LEARNERS OR STUDENTS TO TRAVEL TO ANOTHER PROVICE/METROPOLITAN AREA/DISTRICT**

Regulation 34(5)

*Note: This certificate and an identity document/driver licence must be in the possession of the   
student to whom this certificate is issued.*

I,

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full names |  | | | | | |
| Surname |  | | | | | |
| ID Number |  | | | | | |
| Name of institution |  | | | | | |
| Address of institution |  | | | | | |
| Province of institution |  | | | | | |
| Metropolitan area/district of institution |  | | | | | |
| Contact details | Cell nr |  | Tel No (h) |  | e-mail address |  |

In my capacity as Head of the above-mentioned institution, hereby declare that the undermentioned student, is a student at this institution, and needs to travel between different \*provinces/metropolitan areas/districts for education.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full names |  | | | | | |
| Surname |  | | | | | |
| ID Number |  | | | | | |
| Residential address |  | | | | | |
| Province of residence |  | | | | | |
| Metropolitan area/district of residence |  | | | | | |
| Full names of primary caregiver |  | | | | | |
| Contact details | Cell nr |  | Tel No (h) |  | e-mail address |  |

Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2020.

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

Head of institution

Official Stamp