CHECK LIST FOR NURSING EDUCATION INSTITUTIONS (NEIS) SUBMISSIONS TO THE SANC

NAME OF NEI :_____

S. NUMBER :_____

NAME OF PROGRAM :_____

SAQA ID :_____PERIOD:_____

NO. OF LEARNERS :_____

INITIAL CHECK	YES	NO	N/A	REMARKS
NEI ACCREDITATION STATUS				
PROGRAMME APPROVED BY SANC				
APPROVED NO. OF LEARNERS PER INTAKE				
APPROVED NO. OF INTAKES PER YEAR				
COVERING LETTER				
Original letterhead of NEI				
Email				
Physical address				
Postal address				
Contact Numbers				
Correct programme to be followed				
List of full names for each learner				
Identity numbers for each learner				
Proof of payment attached with correct payment code				
STUDENT CHECKLIST				
Certified copies of Identity document/passport for non- SA citizens				
Certified copies of Senior/Matric certificate				
Certified copies of marriage certificate (where applicable)				
Certified copies of Study permit (Foreign students)				
Certified copies of SAQA certificate (for qualifications not obtained in South Africa)				
Affidavit or letter from Home Affairs for any disparity)				
Signature of candidate and date				

Cecilia Makiwane Building,
602 Pretorius Street, Arcadia, Pretoria 0083
Private Bag X132, Pretoria 0001,
Republic of South Africa

Tel: 012 420 1000
Fax: 012 343 5400
SANC Fraud Hotline: 0800 20 12 16

website: www.sanc.co.za

Chairperson: Dr MC Molepo, Vice-Chairperson: Prof DR Phetlhu, Registrar and CEO: Prof NG Mtshali

Signature of designated person in charge of education and training and date				
Stamp of Nursing Education Institution				
Proof of current license to practice				
Termination of previous training (where applicable)				
RPL profile(where applicable)				

Name of officer: _____

Signature : _____

Date : _____

MD04122023