



CHECKLIST
APPLICATION FOR COMPETENCY CERTIFICATE
SAPS 517



INITIALS & SURNAME		SAPS 86 NO	86/_____/2011	
APPLICANT'S ID NO		APPLICATION NO	C	
CATEGORY		STATION	VILLIERIA	
NO	DESCRIPTION OF DOCUMENTS	YES	NO	
1	SAPS 517 - Application for a competency certificate - completed in black ink by applicant.			
2	Certified copy of training certificate. - Obtained from an SAPS accredited training provider (DFO will confirm this) - Correct unit standards (DFO will confirm this) - Certificate Number (DFO will confirm this)			
3	Two colour passport photos with a white background of the applicant. - Dimensions of a standard passport photo.			
4	Two certified copies of official ID or passport document on which the photograph and particulars of applicant appears.			
5	If the applicant was treated for depression or any other behavioral problem in the last 5 years, a signed medical letter must be submitted together with the application from the relevant medical practitioner. (Must mention if you are competent to possess a firearm according to him/her)			
6	Proof of applicants permanent residential address. - Please supply a certified copy of your electricity account (not older than 3 months) <u>If not available:</u> - Certified copy of persons electricity account (not older than 3 months) and a sworn statement from that person that you are residing at the address provided in the certified copy of the account.			
7	<u>THREE WRITTEN INTERVIEW QUESTIONNAIRES:</u> - Two interview questionnaires must be completed by friends, neighbours or colleagues. - One interview questionnaire must be completed by your spouse. (If not married or divorced - one interview questionnaire must be completed by any family member)			
8	<u>TWO WRITTEN TESTIMONIALS:</u> - Obtained from any other person who provided an interview questionnaire - It must be two written testimonials (signed) from any other person who might have knowledge of the applicant. (They must specify to your character and why they support your application)			
9	Payment of R70 cash. - We will file the certified copy of proof of payment.			
10	Two SAPS 91(a) fingerprints forms - Completed in black ink - Must be signed by the applicant.			
11	If applicant is not yet 21 years of age - section K of SAPS 517 must be completed and signed by a parent or guardian.			
CHECKED BY				
SIGNATURE: PERSAL NO & RANK		INITIALS & SURNAME		DATE
				2011 / /