



**BASIC SAFETY &  
TRAINING SOLUTIONS**

**COURSE: WORKPLACE INCIDENT INVESTIGATION TRAINING**

**Doc no. BSTS-RA-AR**

**Rev: Rev: 0**

**Initiate Date: 20 January 2020**

| Facilitator's Name |      | TRACEY-LEE BLIGNAUT |                 |                       | LEARNER CONSENT<br>TO USE AND STORE<br>PERSONAL<br>INFORMATION. | Date      | OFFICE USE ONLY |          |           |
|--------------------|------|---------------------|-----------------|-----------------------|---|-----------|-----------------|----------|-----------|
| No.                | Name | Surname             | Identity Number | Private or<br>Company |   | Signature | ID Copy         | Moderate | Competent |
| 1                  |      |                     |                 |                       |   |           |                 |          |           |
| 2                  |      |                     |                 |                       |   |           |                 |          |           |
| 3                  |      |                     |                 |                       |   |           |                 |          |           |
| 4                  |      |                     |                 |                       |   |           |                 |          |           |
| 5                  |      |                     |                 |                       |   |           |                 |          |           |

1. PLEASE ATTACH A CERTIFIED COPY OF YOUR IDENTITY DOCUMENT/ID CARD.  
2. PLEASE NOTE THE DATE OF CERTIFICATION MUST BE WITHIN THE PAST 6 MONTHS.

