

PRIVATE SECURITY INDUSTRY  
REGULATORY AUTHORITY  
PRIVATE BAG X817  
PRETORIA  
0001



**PSiRA**  
Private Security Industry Regulatory Authority

**Private Security Industry Regulatory  
Authority (PSIRA)**

Tel. No: (012) 003 0500 / 1

Fax No: 086 -558 3030

(PSIRA 47 A)

**Please select (x) the applicable category you wish to apply for:**

Type of application	X	Description
New Application for accreditation		Emerging Security Service Provider intending to be accredited as security training providers.
Existing Security Service Provider		Actively registered security service providers who could not apply for accreditation on PSiRA Regulated courses due to the moratorium.
Branch registration (Satellite Branch Application for Registration)		A registered Service Provider who wish to apply for accreditation on the existing branch address or wishes to register a new branch including its accreditation. (Note: the initial registration and/or accreditation must be in good standing)
Current Security Services Providers (Non-accredited)		This is applicable to all registered security service providers with an accredited T number but whose accreditation is currently not approved/valid.
Up-grade application on Grades Courses / Capacity Increase and Classroom increase		This will be applicable to current registered and accredited security service providers for PSiRA grades course and intend to apply for additional grades and/or increase number of classroom capacity

We draw your attention to the following provisions of the Training of Security Officers Regulations, 1992 made under the Security Officers' Act (Act No. 92 of 1987), read with section 44 (2) of the Private Security Industry Regulation Act (Act no 56 of 2001) (hereinafter referred to as "the Act"), in terms of the training of security service providers:

## ACCREDITATION OF TRAINING ESTABLISHMENT

### Application:

13. (1) Any person, board, institution or other body wishing to obtain accreditation by the Authority as a training establishment for the training of security officers, shall lodge a formal written application to the Authority on a form compiled from time to time by the Authority.
- (2) An applicant shall in the application in particular –
- (a) furnish full particulars –
    - (i) of the proposed training establishment;
    - (ii) of every director, member, partner or other owner of the proposed establishment, including information and proof of every such person's registration as security officer under the Act; and
  - (b) State the levels of training which is to be offered at the establishment, what the maximum number of trainees may at any time be accommodated thereat and an estimation of the number of trainees the establishment intends to accept annually during the first two years of the establishment's accreditation; and
  - (c) Furnish full information and regarding any person whom the establishment at the date of the application intends to employ or utilize as a training instructor.

We enclose an application for accreditation as a training establishment for completion and draw your attention to the following matters to facilitate the accreditation process:

#### **1. Registration as a Security Service Provider**

Your business and every director, member, partner, owner or trustee must be registered as a security service provider in terms of the Act. The relevant application forms are enclosed for your completion and return to the Authority together with your payment of the applicable registration fees.

#### **2. Training Material**

This requirement is critical for the implementation and delivery training. The Authority requires security to proof availability of the material for the purpose of training whilst the current grades curriculum is being reviewed.

**3. Accreditation Fee**

A non-refundable accreditation fee is payable to the Authority in advance in respect of the application and evaluation of your security training provider. Please note that this will depend on the security service provider registration status. Please submit your payment or copy of your receipt with your application for accreditation.

**4. Declaration:**

I hereby declare and confirm that all information herein contained is to the best of my knowledge true and correct and that any false declaration or withholding of information by myself/ourselves would results in my/our application for accreditation as a training center being rejected:

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

**5. Minimum compliance requirements for the accreditation inspection and evaluation**

Document Name	Security Provider Self Check	
	YES	NO
Accreditation Application form (PSiRA 47):		
Proof of registration with PSiRA (Copy of the Registration Certificate)		
Proof of payment of the prescribed accreditation fee (receipt)		
Receipt of settlement for annual fees		
Lease agreement (of the approved infrastructure assessment for the purpose of training)		
Signed confirmation letter (on an official letter head) in case of re-location relating to the initial address		
Proof of fire department letter or an affidavit		
Signed confirmation letter (on an official letter head) of instructors or a trainee instructor employed		
Policy and Procedures prescribed for the management and administration of training		
Proof of telephone line		
Proof of fax line		

**5.1 Declaration as confirmation for compliance requirements on the self-check (above list) evaluation form:**

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

Name	Surname	Identity Number	Signature	Date

**Important Notice:**

*Incomplete hand delivered applications with insufficient evidence in terms of the minimum requirements will not be accepted. Posted applications will be returned which will results in the applicant to forfeit the application fee. It is therefore of high importance that applicants ensure that all application requirements are attached.*

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(PSIRA 47 A)

**SECTION 1: DETAILS OF THE SECURITY SERVICE PROVIDER**

Name of the applicant Security Provider													
PSiRA Number/T-Number													T
Physical Address													
Sub-burb													
City													
Province													
Postal Code													
Postal Address													
Sub-Burb													
City													
Province													
Postal Code													
Land Line Number													
Fax Number													
E-Mail Address													
Name of the Contact Person 1													
Cell Number													
Name of the Contact Person 2													
Cell Number													

**B. SCOPE OF TRAINING COURSES:**

<b>PSiRA Grade</b>	<b>Note</b>	<b>Select the relevant category</b>
<b>E, D and C</b>	<b>Category 1: Grade E, D and C - (Compulsory)</b>	
<b>B and A</b>	<b>Category 2: Grade B and A - (Combined program)</b>	

**SECTION 2: MEMBERS, HUMAN RESOURCES AND INFRASTRUCTURAL CAPACITY TO RENDER SECURITY TRAINING**

**A. THE MANAGEMENT TEAM**

On the table below, provide particulars of the Director, Member, Owner, Trustee or Partner for the applicant-training center:

<b>No.</b>	<b>Full Names</b>	<b>Capacity (E.g. Directors, Manager etc.)</b>	<b>Cell number</b>	<b>PSiRA No.</b>
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

**B. HUMAN RESOURCE CAPACITY TO RENDER SECURITY TRAINING**

On the below table, provide the details of the instructors or facilitators for course delivery and records management. *(Please attached a signed confirmation letter (on an official letter head) of instructors or a trainee instructor employed proof of employment contract or service level agreement)*

No.	Instructors / Facilitator / Trainee instructor Name and Surname	PSiRA Number	Cell Number	Highest PSiRA Grade	Highest Qualification
1					
2					
3					
4					
5					
6					
7					
8					

**C. THE INFRASTRUCTURE FOR NUMBER OF CLASSROOMS AND STUDENT CAPACITY**

The maximum number of classrooms are 10. The student’s ratio is 1-30.

Proposed number of classrooms with capacity (maximum - 30 learners per classroom)	1	2	3	4	5	6	7	Specify relevant Number <input type="text"/>
Provide the applicable accredited PSiRA class capacity per class room number								All in use Yes/No
Select the applicable resources in respect of Training Resources	Telephone	Facsimile	Locked Cabinet	Communication Equipment	Basic Office Furniture	Record Keeping	Filing Cabinet	Archive System
	Computers	Learning Aids	Practical Area	Simulations Rooms	Student Manuals	Practical Area	Student record management system	

**D: EVALUATION MINIMUM CRITERIA FOR THE TRAINING INFRASTRUCTURE:**

<b>Provision of learning environment</b>	<b>Yes</b>	<b>No</b>	<b>Comment</b>
Are the classrooms adequate for the number of students to accommodate?			
Are their properly furnished and ventilation to provide for the desired conducive learning space? <ul style="list-style-type: none"> <li>• Table and chairs</li> <li>• Learning aids (flip chart, white/black board, projector)</li> <li>• Access to electricity</li> <li>• Safety signs</li> <li>• Proper record keeping               <ul style="list-style-type: none"> <li>○ locked cubit</li> <li>○ course administration</li> <li>○ time table</li> <li>○ student name list</li> <li>○ attendance register</li> <li>○ question and answer sheet</li> <li>○ cover letter</li> <li>○ policy and procedures</li> <li>○ Training Manuals available</li> </ul> </li> </ul>			
<b>Practical training:</b> Do adequate facilities exist for practical training?			
<b>Minimum requirements for occupational health and safety requirements:</b> <ul style="list-style-type: none"> <li>• Is there sufficient ablutions and facilities?</li> <li>• Required safety signs</li> <li>• Evacuation routes?</li> <li>• Are Fire prevention equipment available?</li> </ul>			

**E. MANAGEMENT AND ADMINISTRATION OF TRAINING**

The following policies and procedures are in place to assist the training center in the management and administration of training

<b>Policy and Procedure</b>	<b>Policy Framework</b>	<b>Yes</b>	<b>No</b>	
Enrolment policy	To articulate training centers policy process of learner's recruitment, induction to the course and compliance to the private security industry regulation for employability prospects			
Appeals policy	To the training center's policy and processes to handle appeals from trained learner			
Assessment and certification	To articulate the assessment process, defining competency in line with the acceptable passing % including processes of the SSPs internal quality assurance processes and certification by the SSPs			



iNo	New Fees: Accreditation	Cost																						
<b>Categories:</b>																								
1	New application: For registration, accreditation, (Grade E-C) and administration fee.	R15 600																						
2	Existing security service provider: For actively registered security service providers, accreditation, (Grade E-C) and administration fee.	R12 150																						
3	Branch registration application: a) New registration, accreditation and administration fee	R15 600																						
	b) Existing registered security service provider, accreditation, (Grade E-C) and administration fee	R12 150																						
4	Current security service provider: (Non-accredited provider): Actively registered security service provider, re-accreditation, accreditation fee	R12 150																						
5	<b>Existing Training providers accredited before moratorium and wanting to upgrade number of learners or classes or grades. (Full payment must be done to standardize the Training service providers and no exceptions)</b>	R12 150 <b>Plus R6 800 (B-A)</b>																						
<b>Administration fees:</b> <i>These fees are part of the accreditation fee, due on submission of application with a proof of payment attached</i>																								
6	Admin Fee: a) Approval of inspection report and accreditation report	R170																						
	b) Number of classrooms																							
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">Classroom number</th> <th>Cost</th> </tr> </thead> <tbody> <tr><td>1</td><td>R 240</td></tr> <tr><td>2</td><td>R 350</td></tr> <tr><td>3</td><td>R 470</td></tr> <tr><td>4</td><td>R 680</td></tr> <tr><td>5</td><td>R 940</td></tr> <tr><td>6</td><td>R 1 320</td></tr> <tr><td>7</td><td>R 1 840</td></tr> <tr><td>8</td><td>R 2 520</td></tr> <tr><td>9</td><td>R 3 470</td></tr> <tr><td>10</td><td>R 4 850</td></tr> </tbody> </table>		Classroom number	Cost	1	R 240	2	R 350	3	R 470	4	R 680	5	R 940	6	R 1 320	7	R 1 840	8	R 2 520	9	R 3 470	10	R 4 850
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c) Capacity per classroom																								
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2-30	R 1 320																							

**NB: Applicant Security Service provider should ensure that training manuals for the Grades Courses applied for is readily available for the implementation of training. The Authority undertakes provision of the reviewed training manuals for constituent security training providers post moratorium upliftment at No Cost.**

**APPLICATION CHECKLIST – ACCREDITATION OF TRAINING SECURITY TRAINING PROVIDER**

**(For Regional Office Use Only)**

<b>NAME OF THE TRAINING CENTRE</b>	
<b>DATE THAT THE APPLICATION WAS RECEIVED:</b>	

**Important Notice:**

*The official receiving this application MUST ensure that ALL documentation required are attached to this application. Incomplete applications WILL NOT be acknowledged and WILL BE returned to the training provider. No transactions for the purposes of accreditation must be received unless the application is complete, and the relevant documentation was received.*

Document Name	OFFICE USE	
	YES	NO
Accreditation Application form (PSiRA 47):		
Each page of the PSiRA 47 A form completed with relevant signatures?		
Proof of registration with PSiRA (Copy of the Registration Certificate)		
Proof of payment of the prescribed accreditation fee (receipt)		
Receipt of settlement for annual fees		
Lease agreement (of the approved infrastructure assessment for the purpose of training)		
Signed confirmation letter (on an official letter head) in case of re-location relating to the initial address		
Proof of fire department letter or an affidavit		
Signed confirmation letter (on an official letter head) of instructors or a trainee instructor employed		
Policy and procedures prescribed for the management and administration of training		
<ul style="list-style-type: none"> <li>• Enrolment Policy and procedures</li> </ul>		
<ul style="list-style-type: none"> <li>• Assessment and certification Policy and procedures</li> </ul>		
<ul style="list-style-type: none"> <li>• Appeals Policy and procedures</li> </ul>		
Proof of telephone line		
Proof of fax line		
All directors, members, owners or partners must sign the declaration		

**SECTION 3: PROVISIONAL OUTCOME FOR INSPECTION**  
**(For Regional Office Use Only)**

This application meets the minimum requirements:

<b>Recommend</b>		<b>Evaluators Name</b>	<b>Date recommended:</b>
<b>Not Recommended</b>		<b>Signature</b>	<b>Date not recommended:</b>
<b>COMMENTS</b>			

**SECTION 4: PROVISIONAL OUTCOME FOR INSPECTION**

**(For Head Office Use Only)**

This application meets the minimum requirements:

<b>Recommend</b>		<b>Evaluators Name</b>	<b>Date recommended:</b>
<b>Not Recommended</b>		<b>Signature</b>	<b>Date not recommended:</b>
<b>COMMENTS</b>			