



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:

### **Re-accreditation of training establishments**

#### **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 particulars 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 by you 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. Lesson plan letter:**

Please make copies of the previous lesson plan letters received from the previous accredited consultants.

### 3. Accreditation fee:

A non-refundable accreditation fee is payable to the Authority in advance in respect of the application and evaluation of your training establishment. Please submit your payment or copy of your receipt with your application for accreditation.

### 4. GENERAL INFORMATION:

- PSiRA will only allow the re-accreditation if all arrear annual fees are settled;
- PSiRA will only consider re-accreditation if the security service provider / training centre is still active and registered with PSiRA;
- PSiRA will reject the re-accreditation if the registration of the security service provider is not active;
- On receipt of the required documentation, the PSiRA Inspector will contact the training establishment for an appointment;
- If the re-accreditation fails during inspection you will be required to pay the application fee for re-accreditation application;
- Please ensure the administration of the training centre adheres to the standards and requirements of PSiRA at all times;
- You are hereby reminded that all training may only be provided at an accredited training establishment;
- The training centre must adhere to the minimum training aids as mentioned in this application document;
- Self-study courses may only be presented if you produce a signed agreement of an accredited PSiRA provider;
- You are only allowed to use original lesson plan material and the instructor should adhere to the block programme as set out in the original lesson plan material. Practical must be done on a practical ground and

I have read the above and hereby agree to adhere to the minimum training requirements as set out in the previous Guide to Training and Training Volumes, as well as the regulations.

**Name** : \_\_\_\_\_ **Surname** : \_\_\_\_\_

**Date** : \_\_\_\_\_ **Signature** : \_\_\_\_\_

**Name** : \_\_\_\_\_ **Surname** : \_\_\_\_\_

**Date** : \_\_\_\_\_ **Signature** : \_\_\_\_\_

**Name** : \_\_\_\_\_ **Surname** : \_\_\_\_\_

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**Date** : \_\_\_\_\_ **Signature** : \_\_\_\_\_

**Name** : \_\_\_\_\_ **Surname** : \_\_\_\_\_

**Date** : \_\_\_\_\_ **Signature** : \_\_\_\_\_

**Please note: all directors, members, owners, partners, etc must sign this page.**

**5. ADMINISTRATION:**

**The following documentation should reach this office in order to consider an appointment for accreditation:**

1. Re-accreditation application form;
2. Copy of deposit slip for the re-accreditation application fee;
3. Copy of previous letter received from the previous accredited consultants;
4. Letter from Landlord (minimum lease period 6 months);
5. Letter from Fire Department / an affidavit to declare that no fire will be made on the premises;
6. Receipt of arrear annual fees - All arrear fees must be settled before re-accreditation will be considered;
7. Signed letter from the member/director, etc confirming re-location to new premises;
8. Proof of telephone and
9. Proof of fax line (account) or poof of fax to e-mail (printout)

All training providers who are currently registered with PSIRA as well as future providers who offer the grades and other training (Grade "E" to "A" and specialized training) must as soon as possible also apply to SASSETA to be an accredited security training provider. SASSETA and PSiRA will agree, as referred to above, on a suitable window period (cut-off date) for the transformation from grade training to the NQF based programmes and this will be communicated to all PSIRA and SASSETA providers/stakeholders. Training providers are, however, advised, as a matter of urgency, to ensure timeous accreditation with SASSETA (0861102477).

If you have any further enquiries, please contact the training department at:

- Pinky Sedise : 012-0030638
- Ndabo Luthuli : 012-0030596
- Onica Dinaka : 012-0030627
- Precious Ndlovu : 012-0030636
- Lesiba Maja : 012-0030581
- Lavhe Nelwamondo : 012-0030629

<b>PSIRA Registration No.</b>	

Please complete the following application form and submit this document together with the application form, to the PSiRA training department :

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

**CONFIDENTIAL**

**APPLICATION FOR ACCREDITATION OF A TRAINING ESTABLISHMENT IN TERMS OF  
THE PRIVATE SECURITY INDUSTRY REGULATION ACT (ACT NO. 56 OF 2001)**

<b>Name of Establishment</b>																							
<b>PSIRA Registration No.</b>																							
<b>Physical Address</b>																							
<b>Postal Address</b>																							
<b>Telephone No.</b>						(          )						<b>Facsimile No.</b>						(          )					
<b>Name of person responsible for overseeing the accreditation process</b>												Name:											
												Cell number:											
<b>Proposed number of lecture rooms</b>																							
<i>Please note that only a maximum of 30 students are allowed in 1 classroom</i>																							
<b>Are desk and seating arrangements adequate for proposed number of trainees as well as the writing of examinations</b>																		Yes		No			
<b>Are all lecture rooms adequately ventilated, illuminated and conducive to learning ?</b>																		Yes		No			
<b>Are white or black boards and other training aids clearly visible to all trainees ?</b>																		Yes		No			
<b>Are training aids adequate to facilitate comprehensive instruction of trainees ?</b>																		Yes		No			
<b>Do adequate facilities exist for practical training ?</b>																		Yes		No			

**FULL TIME COURSES FOR WHICH ACCREDITATION IS SOUGHT (Mark with an "X")**

Please mark only the courses as per your lesson plans letter received from the accredited consultant :  
**Full-time courses only**

E	D	C	B	A	Cash-in-Transit	Other Course :
Dog Handler	Armed Response	Instructor	Special Events	Banking	Retail	

**ARE THE FOLLOWING MATERIALS ON HAND FOR ALL COURSES FOR WHICH ACCREDITATION IS SOUGHT ?**

• Course Syllabus / Curriculum	Yes		No	
• Block Programme	Yes		No	
• Training Aids	Yes		No	
• Instructor's Manual	Yes		No	
• Student's Manual	Yes		No	

**DO ALL BLOCK PROGRAMMES CONTAIN THE FOLLOWING INFORMATION ?**

• Number of periods per day	Yes		No	
• Duration of each period	Yes		No	
• Total periods per course	Yes		No	
• Name of Instructor presenting course	Yes		No	
• Subjects per course	Yes		No	
• Number of periods per subject	Yes		No	
• Method and place of instruction	Yes		No	
Is the minimum pass mark set at 60 % per subject ?	Yes		No	
Are students subjected to progress tests, a final examination on the entire course and a practical evaluation ?	Yes		No	
Are all courses, tests, examinations and practical evaluations conducted by an instructor accredited for the course being evaluated?	Yes		No	
Are up to date instructors manuals available to instructors for all courses for which accreditation is sought ?	Yes		No	
Are up to date students manuals available for each student ?	Yes		No	

**HAVE ADEQUATE ADMINISTRATION SYSTEMS BEEN ESTABLISHED TO ENSURE THAT THE FOLLOWING ASPECTS ARE MAINTAINED?**

• Administration guidelines	Yes		No	
• Block Programme	Yes		No	
• Student namelist	Yes		No	
• Roll call sheet	Yes		No	
• Course reports per student	Yes		No	
• Course feedback to management	Yes		No	
• Model examination and answer paper	Yes		No	
• Practical evaluations and Record keeping	Yes		No	

CLASSROOM :			
CHAIRS / TABLES		SAFETY SIGNS	
WHITE BOARD		PRACTICE PRO-FORMAS	
FLIP CHART		IRON / IRONING BOARD	
OHP & SCREEN		BATONS	
STUDENT MANUALS		RADIOS	
LOCKED CABINET		TRANSPARENCIES	
LESSON PLANS		FIRE EXTINGUISHER	

PRACTICAL GROUNDS :	
ENTRANCE ACCESS	
LETTER : LANDLORD	
LETTER : FIRE DEPARTMENT	
SURFACE	

THE INSTRUCTORS :				
Surname & Initials	PSIRA No.	Date Registered	Accredited Grade(s)	Every previous training centre linked to and course(s) presented (Start from the present and work back)

- Were any of your instructors ever involved in any irregularities at any PSiRA accredited training centre?

YES	NO	If yes, please give full details in writing of every instance of the instructor and training centre involved and the context in which the irregularities took place.
<b>Comments:</b>		

- Will this training centre make use of self-material?

YES	NO	If yes, please state the name of the provider and the T number for record purposes.
<b>Name of the provider:</b>		
<b>T number:</b>		

**DECLARATION IN SUPPORT OF AN APPLICATION FOR  
ACCREDITATION OF A TRAINING ESTABLISHMENT**

Please note that the following information is required together with the application for accreditation.

- 1. The Members / Directors / Owner, etc.**  
(Please complete for every member/director, etc)

(PLEASE PRINT)

Surname and Initials	PSIRA No.	Date Registered	Any previous involvement with PSIRA accredited training centre (Name Of Training Centre & Dates Involved)
<u>SURNAME :</u>   <u>INITIALS :</u>			
<u>SURNAME :</u>   <u>INITIALS :</u>			
<u>SURNAME :</u>   <u>INITIALS :</u>			
<u>SURNAME :</u>   <u>INITIALS :</u>			
<u>SURNAME :</u>   <u>INITIALS :</u>			

All members / directors / owners / partners, etc. must sign this document.

**DECLARATION FOR THE ACCREDITATION OF A TRAINING ESTABLISHMENT**

I, \_\_\_\_\_

Identity No.

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hereby declare that I fully understand and accept this 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 result in my/our application for accreditation as a training centre being rejected.

FULL NAMES :

\_\_\_\_\_

SURNAME :

\_\_\_\_\_

I.D. NO. :

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SIGNATURE: \_\_\_\_\_

INITIAL AND SURNAME: \_\_\_\_\_

SIGNED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_

**Stamped and signed by the Commissioner of Oath (SAPS) :**

SIGNED :

\_\_\_\_\_  
(Commissioner of Oath)  
(Justice of Peace)

DATE :

\_\_\_\_\_



All members / directors / owners / partners, etc. must sign this document.

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DAY OF \_\_\_\_\_

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(Commissioner of Oath)  
(Justice of Peace)

DATE :

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