

Mandatory Grant Extension Application

Details of the Organisation and Reason for the Extension Request	
Name of organisation	
Main SDL number	
Number of employees as of 01 April 2023	
Reason(s) for Extension Request	

Details of the Skills Development Facilitator	
First Name	
Surname	
Email Address	
Telephone Number	
Cell phone Number	
Email Address	
Signature	
Date	

Details of a Senior Representative of the Organisation	
First Name	
Surname	
Designation	
Email Address	
Telephone Number	
Cell phone Number	
Email Address	
Signature	
Date	

For office use only	
Date Received by SASSETA	
Approved / Not Approved by Executive Manager (Research, Skills Planning and Reporting)	
Date	
Signature	