**Mining Qualifications Authority**
7 Anerley Rd, Parktown, Johannesburg, 2193
Tel: 011 547 2600
Email: info@mqa.org.za
www.mqa.org.za

# DISCRETIONARY GRANTS APPLICATION FORM 2025/2026

## GRANT APPLICATIONS APPLYING FOR SHORT COURSES PROVIDED BY PRIVATE AND PUBLIC INSITUTIONS

This application form must be completed by Employers/Applicants wishing to participate in the short courses programme supported by MQA.

## A. EMPLOYER DECLARATION

I, [ ] , named hereunder, declare that as the duly authorised representative of the Employer/Organisation confirms that Employer/Organisation will comply with the general rules and criteria hereunder and further confirm that all the information provided in this application is true and accurate.

| | | | |
|---|---|---|---|
| **Name and Surname:** | | **Date:** | |
| | | **Click here to acknowledge commitment** | ☐ |

**NOTE:**

**The Applications Form is an electronic FILLABLE PDF FORMAT with drop-down menus where applicable. You must click on the appropriate selection button and/or type in the information where such information is required. Do not complete the form by hand.**

**This application form must be submitted electronically to grants@mqa.org.za. Application forms submitted to any other e-mail address at MQA will be disqualified.**

## B. GENERAL APPLICATION RULES

1. The application form must be completed in full and submitted to the MQA to grants@mqa.org.za Applications received after the due time and date will not be considered. Application forms submitted to any other e-mail address at MQA will not be considered.
2. Applicants should submit their application/s using the prescribed MQA Discretionary Grant Application Form for the relevant project.
3. It is the responsibility of the applicant to ensure that their application is received by MQA.
4. It is the applicant's responsibility to advise MQA on changes to contact person/s details.
5. All Employers/Organisations with multiple sites using one levy number must submit one consolidated application.
6. The application form may not be altered.
7. The application must be submitted by an Employer/Organisation registered with the MQA with accurate and complete company details.
8. Employers/Applicants must only apply for Learners who will be registered or complete training during 01 April 2025 to 31 March 2026.
9. The MQA may conduct a risk-based approach learner verification site visits to approve grants prior to payment of any grant.
10. MQA reserves the right to conduct due diligence audit before or after allocation of discretionary grants (this may be desktop or physical).

**NB: MQA Funding Policy Rules will apply, and the above rules must be read in conjunction with the MQA funding policy**

## C. EMPLOYER/APPLICANT INFORMATION

| | |
|---|---|
| Employer Name | |
| Skills Development Levy (SDL) Number | |
| Site SDL Number (Paying levies- If different from the above SDL) | |

### PHYSICAL ADDRESS

| | | | |
|---|---|---|---|
| Site Street Name and Number | | | |
| Area/Suburb | | City/Town | |
| Postal Code | | Province | _ |
| District Municipalities | _ | | |
| Local Municipalities | _ | | |
| Rural or Urban | _ | | |

### POSTAL ADDRESS

| | | | |
|---|---|---|---|
| Site Street Name and Number | | | |
| Area/Suburb | | City/Town | |
| Postal Code | | Province | _ |

### SIZE OF THE ORGANISATION *(please select the correct option on the relevant company size)*

| | | | | | | |
|---|---|---|---|---|---|---|
| Size of the Organisation | Small (0 – 49) | | Medium (50 – 149) | | Large (<150) | |
| | ☐ | | ☐ | | ☐ | |
| Has the organisation submitted the WSP/ATR In 2024? | Yes | ☐ | | No | ☐ | |
| Has the organisation submitted the Pivotal Plan and Report in 2024? | Yes | ☐ | | No | ☐ | |

| Note: This section below is to be completed by small organisations that have not submitted the PIVOTAL PLAN and REPORT as well as WSP/ATR | |
|---|---|
| Has the organisation participated in MQA Pivotal Programmes in the past two years? | YES / NO |
| If the answer to the above is yes, please provide details of your organisation's participation below in terms of project name, number of learners allocated, number registered and number of learners completed. | |

| PROJECT NAME | FINANCIAL YEAR | NO OF LEARNERS ALLOCATED | NO OF LEARNERS REGISTERED | NO OF LEARNERS REPORTED FOR COMPLETION |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

## D. SHORT COURSES PROVIDED BY PRIVATE OR PUBLIC INSTITUTIONS

**Note 1: Short Courses is paid upon completion and no workplace approval is required.**

**Note 2: Only Mines or Mining contractors contracted to conduct mining activities may apply for the grants.**

| Name of Programme | No of Learners applied for |
|---|---|
| Short courses | |

***Contact details of person responsible for IHT:***

| | | | |
|---|---|---|---|
| Site Name | | | |
| Site Street Name and Number | | | |
| Area/Suburb | | City/Town | |
| Postal Code | | Province | _ |
| Name and Surname of Site Representative | | | |
| Representative Designation | | | |
| Tel Number | | | |
| Cellphone Number | | | |
| E-mail | | | |

**End of Form**