



SOUTH AFRICAN COUNCIL FOR SOCIAL SERVICE PROFESSIONS

APPLICATION FOR RESTORATION

CHILD AND YOUTH CARE WORKER (auxiliary category)

To be completed by a child and youth care worker within the auxiliary category of registration for the purpose of restoring his or her name to the Register for Child and Youth Care Workers (auxiliary category) as contemplated in section 20(3) of the Social Service Professions Act 110 of 1978

SACSSP
 37 Annie Botha Avenue
 Riviera,
 Pretoria
 0084
SACSSP
 Private Bag X12
 Gezina
 Pretoria
 0031
ENQUIRIES:
 Email: reghelpdesk@sacssp.co.za
 Telephone: (012) 356 8300
www.sacssp.co.za

- GENERAL INSTRUCTIONS:**
- FORM R.2.CYC.1 needs to be completed by a child and youth care worker within the auxiliary category of registration who was registered with the SACSSP and who's name was removed from the Register for Child and Youth Care Workers (auxiliary category) as contemplated in section 20 of the Social Service Professions Act 110 of 1978.
 - IMPORTANT: Persons who register for the FIRST time as a child and youth care worker within the auxiliary category of registration should complete FORM R.1.CYC.2.
 - FORM R.2.CYC.2 must be completed **personally by the applicant** - in print or typed.
 - Study FORM R.2.CYC.2 carefully before completing it.
 - Read the instructions with each section and answer all questions fully, clearly and correctly.
 - Fields that do not apply to you must be clearly deleted. Draw a line through such field.
 - If you have to make any corrections to your answers - *initial* next to the correction made in the right margin.
 - Incomplete and/or non-compliant applications **will not be processed** and will be referred back to the applicant. Therefore, make sure that the application is completed correctly and submitted with *all the required supporting documents*.
 - See **Section H** for the documents that must accompany FORM R.2.CYC.2.
 - Complete the **checklist** at the end of FORM R.2.CYC.2 before you submit it.
 - Print and return this original FORM R.2.CYC.2 to the SACSSP by registered mail or courier mail services for ease of tracking. *Address is on page 8.*
 - Council is required to keep a Register of persons registered in terms of section 19 of the Act and the fields marked with an * will be visible to the public.

INSTRUCTIONS
Registration number
 Must be completed by all applicants. Insert the registration number with the SACSSP that was allocated to you when you registered for the first time a child and youth care worker within the auxiliary category of registration.
SECTION A: Personal Particulars
 • ALL fields in Section A marked with an * must be completed.
SECTION B: Contact details
 • ALL fields in Section B marked with an * must be completed.

SACSSP registration number as child & youth care worker (auxiliary category) -

This is number allocated to you when you registered as child and youth care worker within the auxiliary category for the first time

A. PERSONAL PARTICULARS

Title*_R (mark ONE only with X) Prof Dr Rev Mr Mrs Ms Miss

First names*_R (as on ID)

Maiden name* (if applicable)

Surname*_R (as on ID)

ID number*

Passport No¹ (if applicable)

Country of origin

Date of birth* (YYYY/MM/DD)

Gender^{2*}_R (mark with X) Male Female

Home language

Marital status^{2*} (mark with X) Never married Married Divorced Widowed Widower

Population group² (mark with X) African Coloured Indian White Other

Disability² (mark with X) Yes No If YES, specify

B. CONTACT DETAILS

Postal address*

Postal code

Residential address*

Town*_R

Postal code

Province*_R (mark with X in block) EC FS GA KZ LP MP NW NC WC

Email* (write clearly)

Mobile / Cel number*

Telephone (work)*

Telephone (home)

Fax number

¹ Only complete if you do not have an ID number ² Information for equity and statistical purposes

Proceed to SECTION C on the next page

INSTRUCTIONS:

Please ensure that you complete the correct section:

Section C-1: Persons with a FETC Certificate in child and youth care equivalent to an NQF Level 4 qualification registered with SAQA.

Section C-2: Persons who will be submitting a portfolio of evidence (PoE) on theoretical and practical learning equivalent to 1 650 hours as provided for in regulation 17(1)(b) of the Regulations for child and youth care workers, auxiliary child and youth care workers and student child and youth care workers.

SECTION C-1a: First qualification

- **Must be completed** by all applicants in order to be re-entered into the Register
- **NB:** A certified copy of documentary proof of the qualification indicated in Section C-1a must be attached to this application (FORM R.2.CYC.2).

SECTION C-1c: Subjects

- **Must be completed** by all applicants.
- Write name of each subject per academic year in the appropriate space plus the subject code of each (the latter is allocated by the training institution).
- If you need additional space (more than 5 subjects), please add a page to FORM R.2.CYC.2 and mark it clearly (on top of the page) "SECTION C-1b" with an indication of the academic year.
- **IMPORTANT:** The SACSSP may request that you submit the original (not copy) of documentary proof issued by the training institution, *if this is not on record with the SACSSP*, in which an indication is given of ALL the subjects you have passed during all years of study and the duration of the course in each subject if the subjects and the duration of the course in each subject have not been stated on the certificate, in order to be re-entered into the Register.

C. ACADEMIC PARTICULARS

C-1a. Information on your FETC qualification in child & youth care work

Particulars of training institution (University, college, accredited training provider, etc)

Name of Institution_R

Contact person

Telephone (work) -

Country (If not in South Africa)

Academic information of applicant* (mark with **x**)

Qualification FETC Other (specify)

Duration of course 1 year 2 years 3 years

Name of qualification_R e.g. FETC (CYCW)

Date on which you initially registered as a student for this qualification

y y y y - m m - d d

Date on which this qualification was/will be conferred upon you:

y y y y - m m - d d

C-1b. Subjects related to above qualification (COMPULSARY to complete by all applicants)

	Name of subject or module	Subject code
YEAR 1	1. <input type="text"/>	<input type="text"/>
	2. <input type="text"/>	<input type="text"/>
	3. <input type="text"/>	<input type="text"/>
	4. <input type="text"/>	<input type="text"/>
	5. <input type="text"/>	<input type="text"/>
YEAR 2	1. <input type="text"/>	<input type="text"/>
	2. <input type="text"/>	<input type="text"/>
	3. <input type="text"/>	<input type="text"/>
	4. <input type="text"/>	<input type="text"/>
	5. <input type="text"/>	<input type="text"/>
YEAR 3	1. <input type="text"/>	<input type="text"/>
	2. <input type="text"/>	<input type="text"/>
	3. <input type="text"/>	<input type="text"/>
	4. <input type="text"/>	<input type="text"/>
	5. <input type="text"/>	<input type="text"/>

NOTE TO APPLICANTS WHO COMPLETED SECTION C-1a:

- If you have completed Section C-1a, please proceed to Sections C-3 and C-4, if applicable.

INSTRUCTIONS:

SECTION C-2a: Theoretical & practical learning

- **Must be completed** by applicants who **do not have a completed FETC qualification** in order to be re-entered into the Register
- Indicate each course or workshop or training **and** the number of hours of each.
- If you need additional space, please add a page to FORM R.2.CYC.2 and mark it clearly (on top of the page) "SECTION C-2a" with an indication of the academic year.
- The SACSSP may request that you submit documentary proof of **each** course or workshop or training indicated in Section C-2a, *if this is not on record with the SACSSP.*
- **IMPORTANT:** The SACSSP may request that you submit a portfolio of evidence (PoE), which must include an assessment proving that the candidate meets the outcomes reflected in the FET Certificate in child and youth care work, *if this is not on record with the SACSSP.*

C-2a. Theoretical and practical learning equivalent to 1 650 hours

Only complete this section only if you **do not** have a completed FETC qualification, but have completed 1650 hours of theoretical and practical learning as provided for in regulation 17(1)(b).

Regulation 17(1)(b) stipulates that a person who have obtained theoretical and practical learning equivalent to 1 650 hours prior to the commencement of compulsory registration in terms of the Regulations for child and youth care workers, auxiliary child and youth care workers and student child and youth care workers (Government Notice No. 838 of 2014 published in Government Gazette No. 38135 of 31 October 2014), approved by the Council and provided that the applicant submits a portfolio of evidence, which must include an assessment proving that the candidate meets the outcomes reflected in the FET Certificate in child and youth care work.

	Course/ workshop / training (please provide correct title)	Hours
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Calculate and insert the total number of hours (all courses, workshops and trainings, including those added on an additional page, *if applicable*)

Total number of hours

SECTION C-3: Advanced qualifications

- Only complete *if applicable*.
- Date conferred refers to date when the qualification was conferred upon you by the training institution.
- **NB:** Certified copies of documentary proof of the qualifications in *Section C-3* must be attached to this application (FORM R.2.CYC.2).

C-3. Academic particulars of advanced qualification(s) in child and youth care work

	Qualification _R	Training institution _R	Date conferred
1			
2			
3			

SECTION C-4: Other qualifications

- Only to be completed *if applicable*.
- **NB:** Certified copies of documentary proof of the qualifications in *Section C-4* must be attached to this application (FORM R.2.CYC.2 in order to be entered into the Register).

C-4. Academic particulars of advanced (post-registration) qualification(s) in other fields of study which you possess

	Qualification _R	Training institution _R	Date conferred
1			
2			
3			

Proceed to SECTION D on the next page

INSTRUCTIONS:**SECTION G: Documentary proof**

- Read this part carefully as it will guide you on the documents that must accompany your application (FORM R.2.CYC.2).
- Please number each Annexure

G. DOCUMENTARY PROOF THAT MUST ACCOMPANY THIS APPLICATION

This application **must be accompanied** by the following documents to be regarded as a complete and valid application:

- G-1 Proof of payment** (see Section H)
Proof of payment to the value of the following prescribed fees in South African Rand:
G-1.1 Registration fee as child and youth care worker within the auxiliary category of registration; and
G-1.2 Prescribed annual fee as child and youth care worker within the auxiliary category of registration.
- G-2 Proof of identity** (see Section A)
A certified copy of your identity document (ID) or passport or residence permit indicating your:
a. full names and surname;
b. date of birth or age; and
c. identity number/passport number acceptable to the SACSSP
- G-3 Proof of marital status (if married)** (see Section A)
A certified copy of the marriage certificate of a person who is married (should you wish to register in your married surname).
- G-4 Proof of qualifications (RSA)**
G-4.1 A certified copy of documentary proof of the the highest school grade (e.g. grade 12) you have passed.
G-4.2 A certified copy of documentary proof of the qualification(s) in child and youth care work (auxiliary category).
G-4.2.1 **Original** of documentary proof (*not a copy*) issued by the training institution, *if this was not submitted with your first application or has changed since your first application*, in which an indication is given of –
a. ALL the subjects you have passed during all four years of study and the duration of the course in each subject.
b. ALL the subjects/modules credited or exempted having been obtained from another university of the learning programme over a study period of four years.
- OR**
- G-4.3 If your initial registration which you want to be restored was in accordance with regulation 17(1)(b) the following must be attached to this application *if this was not submitted with your first application or has changed since your first application*:
G-4.3.1 Documentary proof of **each** course or workshop or training indicated in Section C-2a.
G-4.3.2 A portfolio of evidence (PoE), which must include an assessment proving that the candidate meets the outcomes reflected in the FET Certificate in child and youth care work.
- OR**
- G-4.4 If your initial registration which you want to be restored was in accordance with regulation 17(3) the following must be attached to this application *if this was not submitted with your first application or has changed since your first application*:
G-4.4.1 documentary proof acceptable to the SACSSP that he or she is practising or employed as a child and youth care worker (auxiliary level);
G-4.4.2 a job description acceptable to the SACSSP from his or her employer indicating that he or she meets the job profile of a child and youth care worker (auxiliary level); or
G-4.4.3 a declaration to the SACSSP to the effect that the content of the job description and employment designation is a true reflection of his or her employment contract with the employer concerned.
- NOTE:** If any of the records mentioned in G-4.2.1, G-4.3.1, G-4.3.2, G-4.4.1, G-4.4.2 and/or G-4.4.3, as applicable, is not on record with the SACSSP, you will be requested to submit these, before the restoration of your name on the Register.
- G-5 Additional qualifications**
A certified copy of any other qualifications (post graduate) in child and youth care work and/or any other field (if applicable).
See Sections C-3 and C-4.
- G-6 Job descriptions** (see Section F-2)
If you are currently (on the day you submit this application) employed as a child and youth care worker (auxiliary level) or similar, whether fulltime or part-time you must attach a copy of your current job-description signed by the manager or designated person of your employer.
- G-7 A written undertaking from your employer in Section I specifying the following:**
G-7.1 Confirming that you will be supervised by a child and youth care worker within the professional category *registered* with the SACSSP
G-7.2 The nature, content and duration of the above supervision.
G-7.3 Confirming that the child and youth care worker supervising you is aware of the fact that he or she is legally co-responsible for your acts as a child and youth care worker within the auxiliary category of registration.
G-7.4 The official title of the post you hold.
- G-8 Proof of registration with SACSSP by final year students** (see Section E)
A certified copy of your registration certificate as a child and youth care worker within the auxiliary category of registration that was previously issued by the South African Council for Social Service Professions, if available.

Please keep a copy of this form and all the supporting documents for your own records.

SECTION H: Bank details

- See Section H-1 on fees payable
- **ALWAYS use your registration number as DEPOSIT REFERENCE.** If not available, in exceptionally cases, use ID number or passport number.
- The reference number is the only way in which your payment can be traced in Council bank account.
- **Keep a copy** of your proof of payment for your own records.

H. FEES PAYABLE & BANKING DETAILS

Please consult the *Regulations relating to the fees payable by social workers, child and youth care workers, social auxiliary workers, auxiliary child and youth care workers, student social workers and student child and youth care workers* made under the Social Service Professions Act 110 of 1978 to ascertain the applicable fee on the date of application for registration as a child and youth care worker within the auxiliary category of registration. These Regulations are available on Councils website www.sacssp.co.za

Fees are to be paid into the bank account of the SACSSP

Account name:	SACSSP
Bank:	NEDBANK
Account number:	1190739410
Branch:	MENLYN MAINE
Branch Code:	198765
Reference:	A reference number must be provided for every deposit.

IMPORTANT
Proof of payment
must accompany
this application

If you are employed (fulltime or part-time) at the time of restoration, **Section I** on the next page must be completed.

INSTRUCTIONS

SECTION J: Declaration

- Read **all parts** of the declaration in *Section J* carefully.
- Sign FORM R.2.CYC.2 and append the date of completion in the provided spaces.
- Complete the check list below **before** you submit the application

FINAL CHECK LIST FOR APPLICANT:

Before submitting your application check the following:

- FORM R.2.CYC.2 is completed correctly
- All applicable fields and pages are completed and I have double checked
- Section I is completed and signed (*if employed*). Also see *Section G-7*
- FORM R.2.CYC.2 is signed on page 8 (*Section J*)

Attachments

- Proof of payments (see *Section G-1*)
- Certificated copy of ID (see *Section G-2*)
- Proof of marital status - *if applicable* (see *Section G-3*)
- Certified copy of highest school qualification (see *Section G-4.1*)
- Certified copies of qualifications (see *Section G-4.2*)
- Job-description if employed (see *Section G-6*)
- Proof of previous registration a child and youth care worker within the auxiliary category of registration with the SACSSP (see *Section G-8*)
- Other (see *Sections G-4.2.1, G-4.3.1, G-4.3.2, G-4.4.1, G-4.4.2 and/or G-4.4.3, as applicable*)

IMPORTANT

Incomplete applications cannot be processed and will be referred back to the applicant. This will cause an unnecessary delay in the processing and finalisation of your registration.

An additional fee will apply for incomplete applications that were referred back upon the resubmission of such an application.

J. DECLARATION

I, **the undersigned**, declare that the information furnished in this application form is true and correct in all respects and that I am unaware of anything which would serve as an impediment to the restoration of my name as a child and youth care worker within the auxiliary category of registration to the *Register for Child and Youth Care Workers (auxiliary category)* in terms section 20(3) of the Social Service Professions Act 110 of 1978.

Furthermore, I, the undersigned, -

(a) understand that I may only practise as a child and youth care worker (auxiliary category) and use the title *child and youth care worker (auxiliary level)* or *auxiliary child and youth care worker*, subject to being registered as a child and youth care worker within the auxiliary category of registration with the South African Council for Social Service Professions as contemplated in sections 15 and 18A of the Act and upon entry of my name into the *Register for Child and Youth Care Workers (auxiliary category)* as contemplated in section 19 of the Act;

(b) understand, as contemplated in section 15(1) of the Act, that no person may practise as or pretend to be a child and youth care worker (auxiliary category) if he or she is not registered as a child and youth care worker within the auxiliary category of registration under this Act. Any person who contravenes any provision of section 15(1), shall be guilty of an offence and on conviction be liable to a fine, or to imprisonment for a period not exceeding six months as contemplated in section 16 of the Act;

(c) understand that I am required by law in accordance with regulation 19 of the *Regulations for child and youth care workers, auxiliary child and youth care workers and student child and youth care workers* (Government Notice No. 838 of 2014 published in Government Gazette No. 38135 of 31 October 2014) that I may only perform the acts described in the scope of practice for child and youth care work within auxiliary category of registration under the supervision of a registered child and youth care worker (professional category). Whereas regulation 20(2)(d) states that 'in the case of a child and youth care worker practicing within the auxiliary category, a confirmation from his or her employer that the child and youth care worker may function under a registered child and youth care worker'.

(d) may only, in terms of the Act, practise as a child and youth care worker within the auxiliary category of registration subject to the payment of my annual fees as prescribed on or before 1 January of every year. Failure to pay such fee or any other fee within three months after the due date will result in my name being removed from the *Register for Child and Youth Care Workers (auxiliary category)* in accordance with section 20(1)(d) of the Act;

(e) understand that it is my responsibility to keep my particulars in the *Register for Child and Youth Care Workers (auxiliary category)* up to date and that I need to notify the Registrar of the South African Council for Social Service Professions as prescribed in the *Regulations for child and youth care workers, auxiliary child and youth care workers and student child and youth care workers* (Government Notice No. 838 of 2014 published in Government Gazette No. 38135 of 31 October 2014) (regulation 27) within three months of any name change with supporting evidence and within six weeks of any change in my residential or postal address or other contact details as indicated in this form as to enable the Registrar to update my details in the *Register for Child and Youth Care Workers (auxiliary category)* as contemplated in section 19 of the Social Service Professions Act 110 of 1978. (This to be done through FORM-RR.1);

(f) studied the provisions of the Social Service Professions Act 110 of 1978, the *Regulations for child and youth care workers, auxiliary child and youth care workers and student child and youth care workers* (Government Notice No. 838 of 2014 published in Government Gazette No. 38135 of 31 October 2014) and other relevant Regulations (available from the Government Printers or can be downloaded at www.sacssp.co.za); and

(g) agree that if the Registrar receives a request in terms of section 18A(6)(b) for access to the *Register for Child and Youth Care Workers (auxiliary category)* kept in terms of section 19 of the Act for purposes of research that the following additional personal information (information not already available to the public from the Register), i.e. postal address⁵ and email address, may be made available to accredited/approved researchers/students registered with a recognised higher education institution under such conditions as Council may impose to prevent the misuse of such information. I do understand that notwithstanding the afore-mentioned, that I may *opt out* by informing the Registrar in writing that the aforementioned additional personal details may not be made available to anyone for the purpose of research.

Signed at _____ place on _____ day of _____ month 20____ year

Signature: Applicant

Send this ORIGINAL application form with all supporting documents:

- by registered mail to: **OR** by courier to:
- | | |
|--|--|
| The Registrar
SACSSP
Private Bag X12
Gezina
Pretoria
0031 | The Registrar
SACSSP
37 Annie Botha Avenue
Riviera,
Pretoria
0084 |
|--|--|

⁴ Child and youth care worker in this section means a child and youth care worker within the auxiliary category of registration
⁵ Only if postal address is not a residential/ street address

FOR OFFICE USE ONLY

Do not complete

INTERNAL CHECK LIST

- Record of previous registration with the SACSSP found
- No record of previous registration with the SACSSP found. Applicant informed accordingly with an indication that he or she will be registered and not restored (and that the additional information required need to be submitted)
- Applicant informed about outcome on _____ (date)
- Application and supporting documents filed on applicant's file
- Proof of subjects (G-4.2.1) or courses (G-4.3.1) on file, if not, request
- Portfolio of Evidence (PoE) (G-4.3.2) on file, if not, request
- Records as required in terms of regulation 17(3) on file, if not, request
- Applicant's details updated and restored on the *Register for Child and Youth Care Workers* against the name of the applicant
- Registration certificate issued, if approved
- Registration card issued, if approved
- If applicant indicated an *opt out* in terms of *Section J(f)* record on the Register against applicant's name.

Registration number allocated, if approved

9 0 - _____

INTERNAL REVIEW

Name & Surname

Signature

Date

Application is (mark with X)

- APPROVED** **INCOMPLETE** and is referred back to the applicant to provide the missing information. **DECLINED** and the reasons for the decision provided to the applicant.

APPROVED⁶ subject to the provision of the following records (if not on record with the SACSSP when person registered for the first time): (mark with X)

- Proof of subjects - **original** (see *Section G-4.2.1*) Proof of courses (see *Sections G-4.3.1*) Portfolio of Evidence (PoE) (see *Section G-4.3.2*) Records as required in terms of regulation 17(3) (*Section G-4.4*)

Date notice send on records required as indicated above _____

Date records required as indicated above were received from applicant _____

⁶ This does not apply to incomplete applications. Only applicable to applications where the records as indicated in G-4.2.1, G-4.3.1, G-4.3.2, G-4.4.1, G-4.4.2 and/or G-4.4.3, which should have been submitted with the original application that formed the basis for the registration of the person for the first time, are not on the person's file. These are then requested as indicated.