



# South African Nursing Council

(Under the provisions of the Nursing Act, 2005)

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Republic of South Africa

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## EMPLOYER RETURNS – EMPLOYER INFORMATION SHEET

### Instructions:

- The following information must be submitted in respect of the organisation.
- Compulsory information is indicated by an asterisk (\*) after the field description.
- Please complete using a black/blue ballpoint pen. Print the information neatly in the spaces provided.

### 1. Organisation Information:

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1.1 SANC reference number (S-number if you have one): .....

1.2 Name of Employer Organisation: (\*) .....

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1.3 Company registration number (if any): .....

1.4 VAT number : (\*) .....

1.5 Department of Education registration number (if applicable): .....

1.6 Postal address: (\*) .....

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Postcode: .....

1.7 Physical address (as used for courier): (\*) .....

.....

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Postcode: .....

1.8 Telephone number: (\*) .....

1.9 Fax number: (\*) .....

- 1.10 Website URL: (\*) .....
- 1.11 Organisation email address: (\*) .....
- 1.12 Controlling authority (if any): .....  
(for example KZN Department of Health / name of holding company)

**2. Details of Person in charge of Human Resources (for Nursing Employees):**

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- 2.1 Surname (family name): (\*) .....
- 2.2 Given Names: (\*) .....
- 2.3 Title: (\*) Mr / Ms/ Dr / Prof / Other: .....
- 2.4 Designation: (\*) .....
- 2.5 WORK phone number: .....
- 2.6 WORK fax number: .....
- 2.7 WORK email address: .....

**3. Details of Person in charge of Human Resources (for Nursing Students – if applicable):**

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- 3.1 Same as above: YES / NO / Not applicable (mark one)
- 3.2 Surname (family name): (\*) .....
- 3.3 Given Names: (\*) .....
- 3.4 Title: (\*) Mr / Ms/ Dr / Prof / Other: .....
- 3.5 Designation: (\*) .....
- 3.6 WORK phone number: .....
- 3.7 WORK fax number: .....
- 3.8 WORK email address: .....

**4. Statistical Information:**

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4.1 Province in which organisation / head office is located (tick one):

Eastern Cape	<input type="checkbox"/>	EC	Free State	<input type="checkbox"/>	FS	Gauteng	<input type="checkbox"/>	GP
KwaZulu/Natal	<input type="checkbox"/>	KZN	Limpopo	<input type="checkbox"/>	LP	Mpumulanga	<input type="checkbox"/>	MP
Northern Cape	<input type="checkbox"/>	NC	North-West	<input type="checkbox"/>	NW	Western Cape	<input type="checkbox"/>	WC

4.2 Number of Nursing employers: .....