**EMPLOYER CONSENT FOR ATTENDANCE OF MODULAR MASTER’S PROGRAMME IN INDUSTRIAL PSYCHOLOGY**

**RETURN TO:** Ms CM Cillie

 E-mail: cmcillie@sun.ac.za

(Please tick the appropriate block)

**NO**

**YES**

I hereby accept admission to the modular course

I also understand and agree that:

* I have received the dates for the modular blocks;
* the attendance of lectures during these blocks are compulsory; and
* I have communicated these dates to my employer and he/she has agreed to my attendance of these classes (his/her agreement is indicated by his/her signature below).

|  |  |
| --- | --- |
| Date: | ……………………………………….…………………….. |
| Name of applicant: | …………………………………………………...………… |
| Signature of applicant: | …………………………………………………..…………. |
| Name of employer: | ……………………………………………………………... |
| Signature of employer: | ……………………………………………………………... |

Please submit this document before 10 January to cmcillie@sun.ac.za.