

**LEARNERSHIP AGREEMENT TERMINATION FORM**

This letter serves as an agreement that the learnership for the below learner is terminated/cancelled.

**Learnership Title:**

**Learnership Code:**

|  |  |
| --- | --- |
| **Learner Names & Surname** | **Learner ID number** |
|  |  |
|  |  |

**Reason(s) for termination**

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|  |
|  |
|  |

Learner Signature: Employer Signature:

Date: Date:

Witness:

Date:

***Internal Use***

Learner Termination approved: Yes / No

Date Termination Approved

Approved By: