

Do you need to know how to implement the National Curriculum? Framework?

Are you teaching pre-Grade R?

**CAVERSHAM EDUCATION INSTITUTE (NPO)**

**ETDP – 5896**

Tel/Fax: 031-2062000: Cell: 078-4220043

Email – [admin@cavershaminstitute.co.za](mailto:admin@cavershaminstitute.co.za) web site [www.cavershaminstitute.co.za](http://www.cavershaminstitute.co.za)

***Inspiring the teachers of young children***

*We are delighted to announce that Caversham Institute is offering*

*a series of Saturday morning professional development workshops on*

**THE NATIONAL CURRICULUM FRAMEWORK (NCF)**

**SESSION 1 – WELL BEING**

**On: Saturday 27th July 2019**

**At: Windsor Park Tennis Club House**

**Who is Caversham Institute?**

Caversham Institute is a fully accredited Non-Profit, Section 18A, Level 1 B-BBEE Service Provider offering two NQF level 5 qualifications with 1360 accredited Higher Certificates and National Diplomas in ECD awarded. We offer training in 5 regions in KwaZulu Natal and in Cape Town. We are passionate about inspiring the teachers of young children to live and leave a lasting legacy.

**What is this Caversham Workshop all about?**

This first in a series of six workshops covers WELL BEING, the first of the Early Learning Developmental Areas (ELDAs) in the National Curriculum Framework – birth to four.

You will leave with

* A broad understanding of the NCF
* Understand the importance of the ELDA and its aims
* Have a number of exciting ideas to implement with babies, toddlers, and young children
* Met and networked with other ECD teachers and been inspired
* A certificate of attendance

***BOOK A DATE FOR THE OTHER SESSIONS!***

**Session 2** – IDENTITY & BELONGING – Saturday 17th August 2019

**Session 3** – COMMUNICATION – Saturday 7th September 2019

**Session 4** – EXPLORING MATHEMATICS – Saturday 5th October 2019

**Session 5** – CREATIVITY – SATURDAY 19TH October 2019

**Session 6** – KNOWLEDGE & UNDERSTANDING OF THE WORLD – Saturday 2nd November 2019

**Who can attend?**

Anyone who is teaching young children. No formal qualification is required. All you need is the passion to plan and teach more creatively and effectively.

**How much does it cost?**

The course costs R 300 for the workshop and this includes notes and tea.

**How do I apply?**

Fill in the attached Registration Form and scan and email it to [admin@cavershaminstitute.co.za](mailto:admin@cavershaminstitute.co.za)

**BANKING DETAILS:**

**Bank:** Nedbank

**Name of Account: Caversham Education Institute**

**Account Number:** 1380144078

**Branch Code:** 138-026

For further information please contact Jabu on 031-2062000 or 078-4220047 or

Visit our web site – [www.cavershaminstitute.co.za](http://www.cavershaminstitute.co.za)

*Like our Facebook page*



**REGISTRATION FOR THE DURBAN PROFESSIONAL DEVELOPMENT WORKSHOP**

**IMPLEMENTING THE NATIONAL CURRICULUM FRAMEWORK (NCF)**

**SESSION 1 WELL BEING**

**SATURDAY 27th July 2019 – WINDSOR PARK TENNIS CLUB HOUSE**

**Bank** – Nedbank **Name of Account**: Caversham Education Institute **Acc.Number**:1380144078

**Branch Code** - 138026 **Reference**: **Your Name & OUT BOX PORT**

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| PARTICIPANT DETAILS | | | | | | | | | | | | | | | | | |
| TITLE |  | | | | | | SURNAME | | | |  | | | | | | |
| FIRST NAMES |  | | | | | | | | | | KNOWN NAME | | |  | | | |
| ID NUMBER |  | | | | | | | | | | DATE OF BIRTH | | |  | | | |
| NATIONALITY |  | | | | | | | | | | EMPLOYED | | | UNEMPLOYED | | | |
| ETHNIC GROUP | Black | | | | Asian | | | Coloured | | White | | DISABILITY | | | Yes | | No |
| POSTAL ADDRESS |  | | | | | | | | | | | | | | | | |
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| RESIDENTIAL ADDRESS | | |  | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | |
| TELEPHONE: | | HOME |  | | | | | | | | CELL | |  | | | | |
| EMAIL ADDRESS | | |  | | | | | | | | | | | | | | |
| HIGHEST QUALIFICATION | | |  | | | | | | | | | | | | | | |
| TEACHING EXPERIENCE - YEARS & GRADES | | | | | | | | | | | | | | | | | |
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| SCHOOL | |  | | | | | | | | | | | | | | | |
| Please provide, below, details of any medical conditions of which we should be aware (e.g. allergies, diabetes, epilepsy): | | | | | | | | | | | | | | | | | |
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| INFORMATION FOR ACCOUNT PURPOSES | | | | | | | | | | | | | | | | | |
| NAME OF PERSON / SCHOOL RESPONSIBLE FOR THE ACCOUNT | | | | | |  | | | | | | | | | | | |
| CONTACT NUMBER | | | | | |  | | | | | | | | | | | |
| EMAIL ADDRESS | | | | | |  | | | | | | | | | | | |
| WHERE DID YOU HEAR ABOUT US? | | | | Internet | | | | | Magazine/  pamphlet | | | | Friend | | | Information Day | |



**CAVERSHAM EDUCATION INSTITUTE (NPO)**

PROFESSIONAL DEVELOPMENT WORKSHOP

**IMPLEMENTING THE NATIONAL CURRICULUM FRAMEWORK (NCF)**

**SESSION 1 WELL BEING**

I, ……………………………………………………………………………………………………….

ID Number: ……………………………………………….. (Copy attached)

Hereby register for this Caversham Professional Development Course

### I understand that Caversham will

* Recognise, accept and affirm my existing teaching skills
* Assist to deepen these skills through well planned activities and hand-outs
* Help raise my levels of awareness by fostering my skills of
  + Reflection / Self observation
  + Self evaluation of my current teaching and the assessment of learners
  + Planning for creative activities in the classroom
* Give opportunities for dialogue to facilitate the exchange and sharing of experiences and ideas
* Be professional and offer excellence

**I commit myself to**

* Fully explore this Caversham course
* Be open and ready to share and learn, to give and receive in the group
* Make the time and space to implement what I have learnt with my learners

**I also commit myself to**

* Paying the fee of R300 for the workshop.

# I further understand that

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………………………………………….. ………………………

Signed Date

…………………………………………. …………………….

Witnessed Date