



Address:
 Uranium Street
 Triangle Farm
 Bellville

Po Box 297
 Sanlamhof
 7532

Tel: 021 945 4988/1

info@chrissteytler.co.za

APPLICATION FORMS

Clients Information: (please use block letters and mark 'x' in the appropriate boxes)

Name: _____ Surname: _____

Date of birth: _____ Age: _____ Gender: Male Female

ID Number:

--	--	--	--	--	--	--	--	--	--	--	--	--

Language: _____

Address:

Telephone Number: _____ Additional number: _____

Relationship: _____ Name: _____

Education level: _____ other training: _____

Work History: _____

Diagnosis:

Primary diagnosis:

Secondary Diagnosis: _____

Assistive devices used: _____

Medication: None I use the following medication

_____ For _____ Dosage _____

_____ For _____ Dosage _____

_____ For _____ Dosage _____

I am being seen by the following hospital or health member: _____

File number: _____

Disability grant:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

I have a DG
I have applied for DG
I have never applied

Fictional capabilities:

Can use the following transport:

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Train
Taxi
Bus
Registered at Dial-a Ride.

Number: _____

Make use of private transport: _____

Has the use of both hands: _____ Only uses one hand: _____

Any other information or observations: _____

Reason for referral: _____

Referred by: _____ Date: _____

Organization: _____

Address: _____

Telephone number: _____ Signature: _____

Report attached:

Industry Occupational therapist Psychologist

Work evaluation Physiotherapist School

Other: _____

Complete the following and post it to:
The Occupational therapist, Chris Steytler Industries, PO box 297, Sanlamhof,
7532 or Fax to 021 945 4982

For office use only:

Received on: _____

Application recognized on: _____

Additional information required from: _____

Received: _____

Selection interview: _____ Been interviewed

Results:

Waiting list

Work preparation program

Referred to: _____ Date: _____

Other: _____