

**CHARTERED SECRETARIES SOUTHERN AFRICA  
SKILLS DEVELOPMENT PROVIDERS' ANNUAL UPDATE FORM**

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Please complete this annual update form and return to [assessment@chartsec.co.za](mailto:assessment@chartsec.co.za) by 31 January.

**1 SKILLS DEVELOPMENT PROVIDER DETAILS**

Name of organisation	
Address:	
Website:	
Email address:	
Name and position of student adviser at your institution	
Telephone No:	
Fax No:	

**3 CSSA QUALIFICATIONS THAT WERE OFFERED IN THE LAST TWO YEARS & STUDENT NUMBERS**

Please tick all modules taught/to be taught and indicate student numbers.

	2017	2018
<b>CSSA International Qualifying Board Examinations (Professional Post-Graduate Qualification: Company Secretarial and Governance Practice)</b>		
Corporate Secretaryship		
Corporate Governance		
Corporate Administration		
Corporate Financial Management		
<b>CSSA Programme 3 (Professional Advanced Qualification: Governance and Administration)</b>		
Strategic and Operations Management (CIS3-3)		
Financial Accounting 3 (CIS3-2)		
Corporate Law (CIS3-1)		
Management Accounting (CIS3-4)		
Auditing and Independent Review Engagements (CIS3-5)		
<b>CSSA Programme 2 (Professional Qualification: Governance and Administration)</b>		
Management Information Systems (CIS 2-1)		
Financial Accounting 2 (CIS2-2)		
Taxation (CIS2-3)		
Management Principles (CIS2-4)		
Advanced Commercial Law (CIS2-5)		
<b>CSSA Programme 1 (CIS Professional Qualification: Management and Administration)</b>		
Information Systems (CIS1-1)		
Financial Accounting 1 (CIS1-2)		
Commercial Law and Governance (CIS1-3)		

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Communication (CIS1-4)		
Economics (CIS1-6)		

**4 CHANGES**

a) Have you introduced or do you plan to introduce any material changes to the CSSA courses which you offer? If yes, please specify. Please use a separate sheet if necessary.	Yes/no
b) Have there been any changes to the staff teaching CSSA modules? If yes please supply details and attach CVs for new teachers.	Yes/no
c) Have there been any changes to the facilities / resources used to teach CSSA students? If yes, please supply details.	Yes/no
d) Do you have any teaching vacancies on CSSA modules which have remained unfilled for more than one month during the past academic year?  If yes please explain how this has been dealt with.	Yes/no

**5 OTHER PROFESSIONAL TEACHING**

Do you offer tuition for other professional bodies or universities?  If yes please specify below - please use a separate sheet if necessary	Yes/no
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**6 QUALITY CONTROL/QUALITY IMPROVEMENT**

- Has the course been reviewed internally during the last year? Yes/no  
Please attach a copy of the minutes of the annual review.
- Please provide a summary report of feedback obtained from your students and teachers this year and tell us how issues raised were resolved?  
Please attach a copy of the student satisfaction questionnaire used.
- Please detail any complaints received from students or teachers and how these were resolved?  
Please attach a copy of your student complaints form and complaints procedure.
- Please tell us what you have done in the past year to improve quality of the courses you offer?

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- Have there been any irregularities associated with the running of courses at your institution? Yes/no  
If yes please specify below.

- Tell us how your tuition organisation adds value to students registered for CSSA programmes?

## **7 PASS RATES**

Please tell us whether your students' results in the examinations:

- Are in line with expectations?
- Better than expected?
- Worse than expected?
- If your results are worse than expected what action will you take to improve them?

## **8 DECLARATION OF QUALITY**

We declare that the staffing and support resources are sufficient to deliver CSSA courses so that students have a reasonable expectation of success in the examinations.

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Course Leader/Chief Executive

Before returning this form, please ensure that you have included any information requested and payment for monitoring for the next 12 months – **(Annual monitoring fee R2000 per site of delivery)**.

Payment must be made to the following account with the name of your college and "Annual Monitoring Fee" as the reference.

Account Name: CSSA  
Standard Bank – Houghton – Account Number 00 289 8608

## **PROMOTION OF ACCESS TO INFORMATION ACT**

The Institute adheres to the requirements of the Promotion of Access to Information Act, 2000, regarding the dissemination of personal information and endorses the principles regarding the protection of personal information as enunciated by the Law Reform Commission in its Discussion Paper 109.

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The information you supply in or with this form will be used to determine the extension of your accreditation as a skills development provider.

All information supplied will be treated securely and access will be restricted to employees and agents of CSSA. Any data supplied will be disposed of safely and securely as soon as it is no longer required by CSSA.

Please contact the Institute if you have any queries.