

HRD TRAINING SPECIFICATION FORM

Note: This document serves as a guide; it clearly describes the desired outcomes or deliverables of the service to be procured.

BUSINESS UNIT: Gauteng Audit Services

SUB-UNIT: GAS

Part A TRAINING INFORMATION					
Training Programme:	Auditing Governance, Strategy, Ethics and Risk Management (GSER)				
Description of the Training:	Short course				
Course Accreditation: YES NO	No				
(If YES, Service Provider should attach Proof of Accreditation)					
Date(s) of the Training:	13-14 October 2025				
Duration of Course: (No. of days)	2 days				
Number of Attendees: (Attach name list)	12				
Is the Course Aligned to the Current Training Plan: YES NO (If NO, attach approved memo)	Yes				
	Part B TRAINING CONTENT AND EXPECTATIONS				
Course Objectives		Expected Outcome			
The objective of the course:		At the end of the course, you will be able to:			
This course will provide audit executives and r techniques to assist them in auditing governar management, ensuring that their internal audit Global Internal Audit Standards.	nce, strategy, ethics and risk	To understand and applica audit strategy and assess of	tion of audit corporate governance, organizational culture.		
Delivery Method:	Online				
(Face2Face or Online)					
Is the training programme done by a sole service provider? YES NO (If YES, attach a confirmation letter of sole provider)					

HRD Contact Details:



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Part C ADDITIONAL INFORMATION					
No	Item Description	Yes/No	No. of People		
1.	Catering: (attach the full specification for catering including dietary requirements)	No			
2	Venues and Facilities:	No			
3.	Other (Specify):				
General Comments					
Service provider to attach proof of accreditation.					

Part D SIGNATORIES	
SIGNED BY	SUPERVISOR /OR LINE MANAGER:
Compiled by:	Supported / Not Supported / Supported with Amendments
Mr / Ms. Olona Ndongeni-Grey	Mr / Ms . Siyanda Noqube
Designation: Deputy Director	Designation: Director
Date: 23 June 2025	Date: 23 June 2025
	Comments:
SIGNE	ED BY THE DIRECTOR OF HRD:
Approved/ Not Approved/ Approved with	Amendments
Mr ^N / Ms. Designation: Date:	
Comments:	



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