

We are pleased to announce that the RMI will be presenting an on-line seminar entitled -

OPERATIONAL REQUIREMENTS AND INCAPACITY (Retrenchment, Ill Health, Poor Work Performance)

- When: Wednesday 17 August 2022
- Time: 9h00 – 11h00
- Cost: See Registration Form below
- Platform: Microsoft Teams
- Presenter: Brent Barichiev

Some of the topics of discussion will be:-

- Retrenchment – why is it an ‘operational requirement’?
- The correct procedure to follow: redundancy or rationalisation.
- The role of Trade Unions in the retrenchment process.
- When is severance pay not due to a retrenched employee?
- Incapacity due to poor work performance: is it dereliction of duty or gross negligence or poor work performance?
- Incapacity due to ill health – the doctor’s opinion and the employer’s expectations.

- ✓ You are invited to secure your attendance by **completing the registration form below.**
- ✓ A **certificate** of attendance will be provided to each delegate.

Banking details:

Standard Bank Randburg Branch Code : 018005 Account No. : 021670013

Reference for RMI Members:-

IR SEMINAR + BB + RMI Member Number

Reference for Non-RMI Members:-

IR SEMINAR + BB + Your Organisation’s Name

IR SEMINAR REGISTRATION FORM

PLEASE USE A SEPARATE FORM FOR EACH DELEGATE

| SEMINAR | DATE | REGISTRATION FEE (VAT incl) |
|--|---|---|
| Operational requirements and incapacity | Wednesday 17 August 2022 (09h00 – 11h00) | RMI Delegate: R 575 For every additional RMI Delegate, utilizing the same RMI Member Number: R285 Non-RMI Delegate (Not an RMI Member): R1 150 |

| | |
|---|--|
| NAME OF DELEGATE | |
| JOB TITLE OF DELEGATE | |
| ID NUMBER OF DELEGATE | |
| FOR B-BBEE TRAINING RETURNS, KINDLY INDICATE WITH AN "X": | Black <input type="checkbox"/> Indian <input type="checkbox"/> Coloured <input type="checkbox"/> White <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Abled <input type="checkbox"/> Disabled <input type="checkbox"/> |
| NAME OF COMPANY/BUSINESS | |
| RMI MEMBERSHIP NUMBER | |
| PROVINCE | |
| TEL NO: | CEL NO: |
| EMAIL ADDRESS | |
| NAME OF CONTACT PERSON | |
| SIGNATURE | |

KINDLY RETURN THIS FORM TOGETHER WITH PROOF OF PAYMENT OF THE REGISTRATION FEE BEFORE THE CLOSING DATE OF 15 AUGUST 2022

TO: brent.barichiev@rmi.org.za

We look forward to seeing you there.

