

## REQUEST FOR VERIFICATION ACCESS TO EMPLOYMENT (A2E) SCHEME

### Details of the A2E Scheme participant (*new participant*):

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

ID Number: \_\_\_\_\_

Current Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is to confirm that I have known the above-mentioned person for at least 2 years.

I also confirm that, to the best of my knowledge, the above-mentioned person is currently living as a single adult with one or more dependents (*dependents may be persons who are either under 18 years of age or bed ridden or who are severely mentally/physically disabled because they need continuous care*).

### Details of the professional signing this attestation:

Signature: \_\_\_\_\_

Name in Block Letters: \_\_\_\_\_

Profession: \_\_\_\_\_

Contact Details: Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

Mobile: \_\_\_\_\_

