

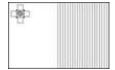


TRAINING FOR EMPLOYMENT TRAINEESHIP SCHEME – APPLICATION FORM FOR EMPLOYERS

COMPANY DETAILS				
Company / Trading Name		VAT No.		
Address				
		Post Code		
Contact Person				
Position				
E-mail		Mobile		
TRAINEE REQU	UEST D	ETAILS		
Kind	ly indica	te the number of employees currently engaged by your organisation:		
Kindly provide a list of occupations where you can provide work exposure. For each occupation, kindly indicate the number of trainees requested.				
		OCCUPATION OVERVIEW*	TRAINEES REQUESTED	
Occupation			<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>	
List at least three main tasks related to the occupation.				
Occupation				
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List at least three main tasks related to the occupation.				

^{*}Attach any additional information (such as job description) related to each occupation, as you deem necessary.

DECLARATION				
I declare that all details in this application form are correct and accurate.				
Name:	ID Card No:			
Designation:				
Signature:	Date:			
Personal data is collected, held and processed by Jobsplus in accordance with the Data Protection Act XXVI of 2001. Personal and confidential data will not be disclosed to third parties unless such data is required in accordance with Jobsplus obligations within Act XXVIII of 1990; or it is required under any other applicable Law. The subject retains the right to access, change and delete, where applicable, personal data as processed by Jobsplus. Data provided should be correct and any changes communicated to the Jobsplus immediately.				
FOR OFFICE USE				
Application Received:	Time: Application Number:			



Operational Programme II - European Structural and Investment Funds 2014-2020
"Investing in human capital to create more opportunities and promote the well-being of society"

Project part-financed by the European Social Fund

Co-financing rate: 80% European Union; 20% National Funds