

Delegation of Authority



Attention: Project Leader - A2E
Scheme
Jobsplus
Head Office
Hal Far Road
Hal Far - BBG 3000

Undertaking

Address

Telephone No

Date

Email

VAT No

To whom it may concern

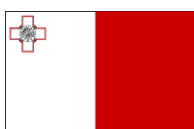
This is to notify that **(name of person being authorised)**, who holds

the position of **(position of the person being authorised)**, within

(name of Undertaking), is hereby authorised to act and sign on

behalf of **(name of person delegating authority)** within

(name of Undertaking)



on 1. all matters, **or** **(mark the appropriate box)**

2. on the following specific matters:

pertaining to the EU co-financed project - A2E Scheme, covering; -

A: All Application Forms as of this date onwards, **or** **(mark the appropriate box)**

B: the following Application Forms:

for the period to **(insert dates).**

Delegated by

Name

Identity Card Number

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Signature

Accepted by

Name

Identity Card Number

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Signature

