

06. Employment Record

Name of Organization	Position Held	Years of Service	Description of work

(Please submit two 3.5cm x 2.3 cm colour photographs at the enrolment)

I certify that the above mentioned information is true and correct to the best of my knowledge.

.....
Date

.....
 Signature of Applicant

(To be completed by applicant's employer)

07. Payment of participation expenses (if selected) Agree Not Agree

08. Facilities to conduct the project will be provided not provided

09. Name and address of Company/Person making payment and providing facilities to conduct the project:

NAME :

ADDRESS :

SIGNATURE :

DESIGNATION :

COMPANY VAT NO. :