

For ETF Board use only

## Application Form to provide Financial Assistance for Vocational Training Courses

## To be completed by current Employer (Part IV)

1.	Name of Employer/Est	ate an	d addr	ess:					•••••		•••••		
							•••••		•••••				
2.	Full name of the Memb	oer:											
			•••••						•••••				
3.	Member's NIC No:												
4.	Employer No:					Memb	er No:	:					
F	Data of appointments			٦	<b>D</b> 4	5.4	1	V	V	V	V	1	
5.	Date of appointment:			1	M	IVI		Y	Y	Y	Y		

6. Contribution during the 12 months proceeding in the month in which this student sat the GCE A/L examination. (If the contribution have been credited through e-service, it is not necessary to complete this section and it is sufficient to make a note that the contribution have been paid through e-service)

Year	Month	Member's Contribution Amount	Date	R1 or R4
2023	February			
2023	March			
2023	April			
2023	May			
2023	June			
2023	July			
2023	August			
2023	September			
2023	October			
2023	November			
2023	December			
2024	January			

I certify that the information furnished above is true and correct. Also certify that I am aware that if I furnish or cause to be furnished any false return or information relating to this claim I shall on conviction be liable to a fine or imprisonment under Section 39 of the Employees' Trust Fund Act No. 46 of 1980.

Name of the Employer	
Address	
Tel: No	
 Signature	Date
Name of the Signatory	
Designation	
	Official Seal