

**MINISTRY OF LABOUR, HUMAN RESOURCE DEVELOPMENT AND TRAINING
PROGRAMME (YEP/BTW/DTP):**

STATUS OF TRAINEES STILL UNDER PLACEMENT FOR THE MONTH OF

Company name:Contract Number:

Business address:

Name and Status of Contact person:

Phone number of contact person:Email address of contact person:.....

Nature of business activities:

Name and National Identity Card No. of trainee	Period of placement	Job Designation	Stipend paid (Rs)	Specify whether trainee is still under placement YES or NO If No specify Date trainee left the Company	Signature of trainee

I certify that the above mentioned trainees are still under placement at my Company, **their signatures are same as that on their Identity Cards** and all the information submitted are correct. I, further acknowledge having taken note that any incorrect information provided by the Company may lead to legal proceedings.

I hereby acknowledge that failure to provide required information during the 1st week of each month to this Ministry and a copy to HRDC may entail my disqualification from participating under the YEP/BTW/DTP.

Seal of Company

NAME: DESIGNATION:SIGNATURE:

DATE:

FOR OFFICE USE OF MLHRDT

Based on the above, please proceed with the refund of stipend to the employer for the above-mentioned month

NAME: DESIGNATION:SIGNATURE: DATE: