



**Ministry of Industries**  
**Certificate Training Course in Packaging Technology-2022**

**Application**

1. Applicant's Name: .....
2. Age: .....
3. Designation: .....
4. Attached Division & Responsibilities: .....
5. Educational Qualification  
O/L, A/L and Degree: .....
6. Experience: .....
7. Professional Qualifications: .....
8. English Proficiency: Speaking: Good/ Fair/ Poor   Writing: Good/ Fair/ Poor
9. Telephone No: .....   Mobile: .....  
Fax: .....   E-mail: .....

.....  
Applicant's Signature

10. Employer's Name: .....
11. Designation: .....
12. Average Annual Turnover: .....
13. No of Employees: .....
14. Company Address: .....
15. Employer's Telephone: .....
16. Employer's Certification:

I certify that the 50% of the total cost for the above programme will be paid by this company. Payment will be made prior to commencement of the training programme, in the event above nominee is selected.

Employer's Name and Signature : .....  
Employer's Designation : .....

Official Stamp of the Company : .....