CAREER PROSPECTS LIMITED

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WORKSHOP TITLE: ……

VENUE: ……

DATES: ……

ORGANIZATION NAME: ……

PHONE NO.: …… FAX NO.: ……

EMAIL ADDRESS: ……

We here by nominate the under listed persons to attend the above workshop:

NAME	JOB TITLE
1.	
2.	
3.	
4.	
5.	
6.	

Please find attached a cheque in the amount of K …… , being participation fee for the same.

…… …… ……

Authorised Signatory **Date** **Official Stamp**