

## EMPLOYERS EXPRESSION OF INTEREST TO HOST UNIVERSITY OF TECHNOLOGY LEARNERS ON WORK-INTEGRATED LEARNING PROGRAMMES.

<b>Name of Company</b>		<b>Company Size</b> (Small, Medium, Large)	
<b>Company Physical Address &amp; Province</b>		<b>SDL/Levy Number OR T13 Number</b>	
<b>Name of Company Representative</b>		<b>Designation of Company Representative</b>	
<b>Email address of Company Representative</b>		<b>Company Telephone Number</b>	
<b>Company Operating Business in Insurance Sector</b>	Yes	<b>Insurance Sub-sector in which Company operates Business</b>	
	No		
<b>Total Number of Learners required</b>		<b>Number of Learners required per field of Study</b>	<b>National Diploma in Marketing</b>
			<b>National Diploma in Finance</b>
			<b>National Diploma in Office Management &amp; Technology</b>
			<b>National Diploma in ICT Communication</b>
<b>Learners with Disabilities</b>	Yes	<b>Programme Commencement Date</b>	
	No		
<b>Signature of Company Representative</b>		<b>Date</b>	