



# HUMAN RESOURCE DEVELOPMENT COUNCIL

HRDC, 4<sup>th</sup> Floor, NG Tower, Ebene Cybercity. Tel No: 454 4009. Fax No: 454 6220/6260

Website: [www.hrdc.mu](http://www.hrdc.mu)

**FORM G3**

## APPLICATION FOR GRANT PAYMENT

Name of Enterprise:.....SN.....

Address:.....Tel:.....

Course Title:.....

MQA Course Code:.....

Training Institution:.....

MQA Registered Trainer:.....

Course Duration: From..... To:.....

**Bank Details:** Bank Name..... Account Name:.....

Account Number:.....

### *EMPLOYEE DETAILS*

No.	Surname	First Names	Sex M/F	Position Held in Company	National Identity Card No.																		
1.																							
2.																							
3.																							
4.																							
5.																							
6.																							
7.																							
8.																							
9.																							
10.																							

**(Please make additional copies if necessary)**

Name:..... Designation:.....

Signature:..... Date:.....

Documents enclosed (please tick as appropriate)		
1	Invoice and Receipt	
2	Individual Certificate of Attendance	

Please note that all sections of the application must be completed and accompanied with the above documents or else your application would not be considered.