



Structural Funds Programme of Malta (2004-2006)
Training Co-financed by the European Union
European Social Fund (ESF)



REQUEST FORM CBSF 002 - LOCAL TRAINING

Applicants are requested to refer to the application procedure before completing this request form.

Applicant Details:

1. Name of Applicant
2. Designation
3. Department/Organisation
4. Ministry - where applicable
5. Telephone number
6. Email
7. Signature of Applicant

Training Activity Details:

8. Theme and description of training activity
9. Dates of training activity

Financial Details:

11. Trainer's Flights - economy class
12. Per Diem - europaid rates
13. Accommodation & Transfers
14. Trainer's Fees - where applicable
15. Venue and facilities
16. Interpretation Facilities
17. Electronic/printed material

10. Estimate LM <i>to be filled in ex-ante</i>

18. Actual LM <i>to be filled in ex-post</i>

19. Comments / vote(s)/bank account(s) for reimbursement

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For official use only:

20. Reference

21. Date:

Approved

Rejected

22. Official Stamp of ESF IB & Signature

23. Documents required for payment by Treasury

24. Flight ticket & Boarding Pass

25. Flight ticket payment receipt

26. Statement of Expenditure

27. TR#S-9 (for non-public officers)

28. Reimbursement letter

29. Original Invoices