



GRADUATES EMPLOYMENT AND ENTREPRENEURSHIP PROGRAM

REQUEST TO BECOME HOST COMPANY

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|-----------------------------|--|
| Name of Company | |
| Company Registration Number | |
| Address | |
| Telephone Number | |
| E-mail Address | |
| Name of Officer-In-Charge | |
| Position Title | |

Summary List of Job Placement:

| No. | Job Title | Field of Study | Supervisor/Manager* | Number of Position |
|-----|-----------|----------------|---------------------|--------------------|
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I hereby agree we will be providing job placement to graduates per the above job title and attached job tasks for the duration of job placement with our company.

Signature:

Company Stamp:

Name:

Date:

Note:

**Name and position of supervisor*

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| <p><u>For Talent Suites purpose only</u> Officer in Charge: Phone No:</p> |
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Job Scope

(to be filled for each position)

Company Name:

Supervisor Name:

Position Title:

Work Days: Monday to Friday
(Please specify if different)

Work Hours:

Brief Description of Scope:

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List of expected tasks to be performed:

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| 1. |
| 2. |
| 3. |
| 4. |
| 5. |

Additional Information (if required)

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