

International Workplace training

ORGANISATIONS' APPLICATION

Labour Mobility in Europe project F20109

Applied service	
	Workplace Finnish
	Workplace Swedish

Information of the company/organisation

Name of the company/organisation	
Business ID :	
Postal address:	
Line of business:	
Turnover of the company/organisation at Group level (last fiscal year)*:	
Balance sheet total of the company/organisation at Group level (last fiscal year)*:	
Number of employees in the Group*	
	0-4 employees
	5-9 employees
	10-19 employees
	20-49 employees
	50-99 employees
	100-249 employees
	250-499 employees
	over 500 employees

**If the company belongs to the Group, its information must be entered at Group level. A company belonging to the same Group refers to a single undertaking as defined in Article 2, Section 2 of the de minimis Regulation 1407/2013.*

Contact person

Name:	
Position in the organisation :	
Postal address(if not same as the company address):	
E-mail:	
Phone:	

Signatory to the agreement

The person(s) who will sign the purchase agreement on behalf of the company *

Name:	
Position in the organisation :	
Name:	
Position in the organisation :	

* A contract concerning the service is entered into by the Labour Mobility in Europe project, the company and the training provider. The signatory of the purchase agreement must have the right to sign on behalf of the company.

Supplementary information for the application

<p>Within the 12 months prior to submitting the application, have you permanently or temporarily laid off employees from the same or similar tasks for productive or financial reasons, or shortened their working hours? Yes; from which tasks? No</p>
<p>Is your company subject to an outstanding recovery order following a previous Commission decision declaring an aid illegal and incompatible with the internal market (EU) No 651/2014, article 1, paragraph 4 a)? Yes No</p>

Training application annexes

	<p>De minimis aid notification from a company participating in the project <i>If the company belongs to the Group, de minimis aid information must be entered at Group level*</i></p>
	<p>Statement of outstanding taxes (issued by Tax Administration, within 3 months from the date of submitting the application) We recommend that the Labour Mobility in Europe project/TE Office order a certificate of tax debts on our behalf</p>
	<p>Electronic invoicing information EDI-code: Operator ID: Electronic invoicing information annex Invoicing address same as the company address</p>

*A company belonging to the same Group refers to a single undertaking as defined in Article 2, Section 2 of the de minimis Regulation 1407/2013.

Supplementary information for the application

<p>How did you find out about the training?</p>
<p>A short description of the need for training and the desired content. Hopes or comments related to the practical arrangements of the training (eg. a desirable trainer, wishes of time and duration, hopes of implementation and forms of education)</p>

An assessment of the number of individuals participating in the training NB: The participant must have an employment contract and a residence permit. Asylum seekers cannot participate in the training financed by the European Social Fund, although they have a right to work during the asylum process.	
Have the individuals participating in the training previously participated in International Workplace training or similar training?	
	Yes, where
	No

A contract concerning the service is entered into by the Labour Mobility in Europe project, the company and the training provider. Before the contract is concluded, the training provider draws up a training implementation plan on the basis of contract negotiations.

We hereby declare that the information provided herein is correct, and authorise the employment and economic development authorities to acquire all the information and accounts needed in processing the application. We also declare that the company is not an “undertaking in difficulty” (article 2, paragraph 18), as defined in the Commission Regulation (EU) No 651/2014, article 1, paragraph 4.

We agree that the supplementary information for the application can be given to the training provider for training planning.

Signature

Place and date:

 Print name
 Position in the organisation

 Print name
 Position in the organisation