



Updated 2015-12-18

Please scan and e-mail your filled in application to the mailbox of any of these countries. Choose your country of residence, or else send it to Sweden.

Denmark: jkuyfej@bif.kk.dk Finland: yfej@te-toimisto.fi lreland: yfej@welfare.ie Portugal: yfej@iefp.pt Slovenia: yfej.eures@anofm.ro Slovenia: yfej@ess.gov.si

I certify that the following person has been employed:

Sweden: <u>yfej@arbetsformedlingen.se</u> Azores Reg. Government: <u>yfej.dreqp@azores.gov</u>

## **CONFIRMATION OF EMPLOYMENT**

To be filled in by the employer. Please use capital letters. This confirmation must be submitted to the project no later than 4 weeks after the first day of work. Otherwise, the application will be closed.

-	~ .		
Surname			
First name			
Street			
Post Code	City		
Country			
Has taken up work/will tak	e up work in our com	pany on:/	/20 (dd/mm/yyyy)
Employment conditi	ons:		
Salary/month		. Working hours/we	ek
Occupation			
angth of amployment	C. 6 months	□ 6 months	□> 6 months
Length of embloyment	∟k o monus	<b>□</b> = 0 monus	אווטוווט כע וווטווווט









Company name	
Registration/org. number	
Number of employees	
Contact person	
Telephone	
E-mail address	
Street	
Post code City	
Country	
Date/20 (dd/mm/yyyy)	Signature
	Company Stamp:



