**APPLICATION FORM FOR TRAINING**

**OF**

# SEED POTATO DEALERS

|  |  |
| --- | --- |
| Name of applicant  (In capital letters) |  |
| CNIC # |  |
| Date of birth |  |
| Gender |  |
| Postal address |  |
| Contact Number |  |
| Capacity  (Annual seed potato turnover/sell) |  |
| Annual quantity of seed traded in from down country for the last 3 years | Year 1.  Year 2.  Year 3. |
| Education  (Copy of certificate/degree to be attached) |  |
| Name and contact details of person in case of emergency |  |
| Training(s) attended in seed potato production. (if any) Give details: |  |
| Willing to participate in exposure visit (if selected) | Yes:\_\_\_\_\_\_\_\_\_\_\_\_ No:\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Willing to participate in Classroom Training (if selected) | Yes:\_\_\_\_\_\_\_\_\_\_\_\_ No:\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Problem(s) faced in seed potato Trading |  |
| Please define how this training will help you |  |

**Terms and conditions**

* Limited seats are available and selection of participants will be subject to meeting certain criteria
* The selected applicants may be required to sign certifications as per TAP requirement
* The applicant will follow the guidelines provided and other formalities desired by TAP
* TAP will not accept any risk, liability whatsoever that may arise during the training and field visit
* Incomplete applications will not be entertained
* A persons applying for the training program will be assumed to have read, understood, and agreed with the information provided in this document
* TAP reserves the right to reject any application without disclosing any reason and the decision will be incontestable
* In case of multiple eligible applications, trainees will be selected on first come first served basis

By affixing my signature below, I certify that to the best of my knowledge the information provided in this application is accurate.

Submitted by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Checklist**

* Duly filled and signed application form
* A clear (readable) copy of CNIC
* Copies of academic certificates/degree

All applications shall be addressed to:

**The Agribusiness Project**

**Maroof House, Near Justice Sahib Khan House**

**Noor colony, Jutial Gilgit.**

**PH: 05811450336-7**