 

ANNEX III LABOUR CERTIFICATE

I, the undersigned, hereby certify that Mr/Ms , of Identification Card No. , is currently working at the institution

, in the specific position detailed below, for the period of time indicated.

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| --- | --- | --- |
| **POSITION** (indicate in detail the responsibilities exercised during the period of time the applicant has been at the institution. If the applicant supervises personnel, please indicate the number of collaborators who report to  him/her) | From day/month/year | To day/month/year |
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If selected for the AGCID – Universidad de Chile South-South Cooperation Scholarship Programme, the applicant is authorised to participate in and dedicate part of his/her working day to the international course “Spanish as a Foreign Language Course for Civil Servants from the English-Speaking Caribbean” on the dates specified by those implementing the course. The organisation undertakes to provide the support necessary for the proper application and transfer of the knowledge received, as well as the implementation of the corresponding action plan.

Stamp of the Institution

|  |
| --- |
| (Signature) |
| **NAME OF SUPERVISOR** |
| Identity Number  (Position) |
| Institution |
| Contact phone number |

Location, date