

# REQUEST FOR OCCUPATIONAL SKILL UPGRADING (OSU TRAINING)

TECHNICAL SCHOOL/VOCATIONAL TRAINING CENTRE:

.....

For Ms./Mr. ....

Her/his position/trade .....

Suggested time and duration .....

Wanted subject area and skills .....

**Please provide more details of the skills required:**

1. ....

2. ....

3. ....

4. ....

5. ....

6. ....

\_\_\_\_\_  
Signature (Trade Head)

\_\_\_\_\_  
Signature (Principal)  
(Official stamp)

\_\_\_\_\_  
Date

the lower part will be filled in by TITI/osureqt1, 15.7.97

OSU recommended/date .....

OSU approved/date .....

Agreed upon duration of OSU .....

Suggested OSU place/contact person/date .....

Facilitator/trainer from TITI .....