Technical Education and Skills Development Authority
CY 2017 Training for Work Scholarship Program (TWSP)
TENDER (Form 1)

Region:_____

Province/District:_____

Name of TVI:_____

Address:_____

Qualification Title	CTPR No.	Name of Trainer and NTTC No.*	No. of Slots (per Batch)	Indicative Date of Training and Assessment (per Batch)		
				Start	End	Date of Assessment
(1)	(2)	(3)	(4)	(5)	(6)	(7)
TOTAL	-					

**Note: - The name of identified trainer may change due to valid reason. In case of change, the TVI must inform the Regional Office (RO) concerning the reason. Included in the notice of change is the name of new trainer who must also be qualified with NTTC.*

**Disclosure: That I have on-going scholarship programs with other government agencies or other funding organizations ( )
That I have no on-going scholarship programs with other government agencies or other funding organizations ( )

Submitted by:

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Name of Administrator