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PTW TRAINING NOMINATION FORM



#	Complete Nam	e of Job Title	Employee Number	Project	Company		-Contractor /	OSC	Refresher Course
	Attendees	Job Title	Employee Humber	Troject		De	epartment		Refresher course
1									
2									
-									
3									
4									
5									
6									
7									
8									
9									
10									
Justif	ication for the pr	oposed number of nominees (to be filled up by the nom	inating company):				
Nomi	inated by:								
Name					Designation				
	_								
Signa	ture				Company				
					Email Address				
	<u> </u>								
Note									
1. Va	lid ID copy must b	e attached along with Training	Nomination form (For eac	ch person)					
Approv	ed By:	Director, Operations and Maintenance		Department Manager			☐ Manager, HSE (Operation	ns and Maintenance)
Signatu	re:								
Date:									
Deriii	nat Codo I so	W WW DTW Training Namination Forms 00					Effective Data	1	1
File Nar	ent Code YY ne H	Y.YYY. PTW Training Nomination Form.00 IL-09581.00.00-1-PTW Training Nomination Fo	orm				Effective Date: Rev No. 00		Page 1 of 1