

Summary of Sending Organization

(written by the head of the candidate's work place)

Name of Organization		
Name of Representative		
Address		
	Tel:	Fax:
Date of Foundation (established)		
Relation with the organization which receives the trainee		
Type of Business	Social Welfare NGO	
Capital (in local currency or US\$)	Net Sales (most recent fiscal year)	Number of full-time employees
Main Trading (transaction) Partner Country	Exports	
	Imports	
Name of Manager (person responsible)		Position

Date prepared (Y/M/D): _____

Name of the sending organization: _____

Position and name of the person responsible:
