

CHECK LIST *PRIOR TO PLACEMENT ABROAD* FOR THE TRAINING PROGRAMME FOR Moulders

04/2003

<b>Name of company</b>				<b>Tel.</b>	
<b>Street</b>					
<b>Postcode</b>		<b>Town</b>		<b>Country</b>	
<b>Owner(s)</b>					
<b>Contact person</b>				<b>E-mail/ direct tel.</b>	

<b>EMPLOYEES</b>	<b>Number</b>
- within the same vocational area	
- with similar qualifications	
- total in the company	

<b>WORK AREAS</b> (within which the company will be able to place trainees) - Tick off the appropriate	
Machine moulding	
Hand moulding	
Core production	
Casting	
Chilled casting and pressure casting	
<b>Other work areas</b>	

<b>DATE &amp; SIGNATURE</b>
<p>_____ date                      _____ name</p> <p>_____ signature</p>

<b>COMPANY'S EQUIPMENT - Tick off the appropriate</b>	
Moulding machines	
Core production machines	
Other relevant equipment:	
Sand types – please state which:	
<b>Other equipment</b>	

<b>COMPANY'S MAIN PRODUCTS</b> (which are sold, serviced, manufactured and/or developed)

<b>Approved by the Apprenticeship Committee of the Metal Industry</b>	
_____ date	_____ name
_____ signature	

**To be sent to: The Apprenticeship Committee of the Metal Industry • Vesterbrogade 6D, 4. • DK-1780 Copenhagen V**