



# MINISTRY OF PUBLIC WORKS

## DEMERARA HARBOUR BRIDGE CORPORATION

Peter's Hall, East Bank Demerara, Guyana  
 E-mail : [dhbc@harbourbridge.gov.gy](mailto:dhbc@harbourbridge.gov.gy) Tel: 233-7007-10, 233-5577

### APPLICATION FOR APPRENTICESHIP

**APPLICATION No.**

Equal Training Opportunity - it is our policy to provide equal training opportunity for applicants of neighbouring communities to the programme without regards to race, colour, religion, sex or national origin.

### INSTRUCTIONS

Please print in black ink or type information

NAME (Last, First, Middle)	DATE OF BIRTH (yy/mm/dd)								
PRESENT ADDRESS	PHONE No. (H) ..... (M) .....								
PERMANENT ADDRESS	PP/ ID No ..... N.I.S No. ....								
COMMENCEMENT DATE:	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Choice of Trade</td> <td></td> </tr> <tr> <td>Welding/ Fabrication</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>Auto Mechanic</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td>Electrical Installation</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> </table>	Choice of Trade		Welding/ Fabrication	<input type="checkbox"/> Yes <input type="checkbox"/> No	Auto Mechanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	Electrical Installation	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Auto Mechanic	<input type="checkbox"/> Yes <input type="checkbox"/> No								
Electrical Installation	<input type="checkbox"/> Yes <input type="checkbox"/> No								

### EDUCATION

Primary/ High/ Secondary School attended	Course of Study	Qualifications
.....	.....	.....
.....	.....	.....
Vocational or Technical School attended	.....	.....
.....	.....	.....
.....	.....	.....
Other	.....	.....
.....	.....	.....

Do you smoke  Yes  No

Religion ..... Ethnicity ..... Nationality .....

Next of Kin ..... Relationship..... Contact No: .....

Republic Bank Guyana Limited Account No: .....

TIN No: .....

**SIGNATURE OF APPLICANT:** ..... **DATE** .....