APPLICATION FORM

'HOMEBIOGAS' HANDS-ON TRAINING

Recent

Picture

RESELLER / INSTALLER	RKETER / PROMOTER OTHERS
NAME:	
PLACE OF BIRTH:	HOMETOWN:
RESIDENTIAL ADDRESS:	
PRESENT JOB:	RANK:
EMPLOYER'S NAME:	
CONTACT NUMBERS:	EMAIL:
1:	
2:	
ID TYPE:	ID NUMBER:
KEY PERSON and CONTACTS:	
SIGNATURE:	DATE:
	OLLOWING: ID, BUSINESS REGISTRATION (IF ANY) RECENT al educational credentials will inform our decision)
and used for the purpose of determ for the provision of goods/services. Further assessment and selection m	uestionnaire will be held in confidence by Webber Energy ining your suitability for meeting our general requirements hay be required before any indication can be given on the ion on our Customer/Reseller/Installer/Marketer/Promoter
Ī	Declare that the information given in the
application is to the best of my kno statement will disqualify further cons	wledge and correct. I understand and agree that any false sideration of this application.

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OBJECTIVE:

To become a home biogas Installer/Reseller

BENEFITS:

You become an installer for home biogas You will know how to maintain the system

You will understand the concept of biogas in general

You can market the product perfectly

Confidently self-employed in homebiogas environment.

B

OBJECTIVE:

To become a home biogas Marketer/ Promoter

BENEFITS:

You will understand the concept of biogas in general

You can market the product perfectly

FOR OFFICE USE ONLY:		
Comments:		
Checked by:		
Date:		