



e-form

First Aid & Safety at Work Course



Date from: Date to:	In collaboration with St. John Ambulance (Malta Duration: 22.5 hours (including coffee breaks) Venue: 17, Edgar Ferro Street, Pietà PTA 1533
Please complete & submit this application form, enclosing the relative fee of €70 incl. VAT	
COMPANY DETAILS	
Agency / Department / Company	
Address	
7.44.1000	
VAT Number	Telephone
Contact Person	
Position	
E-mail	
Application Date	

PERSONAL DETAILS Name and Surname Designation **ID Card Number** Gender Age **Telephone** Mobile E-mail **METHOD OF PAYMENT Issuing Bank & Cheque Number Purchase Order Number**

Note: A cancellation fee amounting to half of the participation fee, may, at the discretion of the Authority, be charged when a participant who has confirmed attendance fails to turn up for the course. However, substitute candidates will be accepted. The FULLY COMPLETED application form with the appropriate remittance should be forwarded and made payable to **Awtorità Saĥha Sigurtà Post tax-Xogĥol**, 17 Triq Edgar Ferro Pietà PTA 1533.

You may also fax an advance copy of your application on 21232909 or via email on courses@ohsa.mt.

Applicants are to ensure that proof of Departmental Head approval is attached to the relevant application

Please check this box if you DO NOT wish to receive updates from the Authority

The information supplied to OHSA on this form shall be treated in the strictest confidence in terms of the Data Protection Act XXVII, 2001 and subsequent amendments.