

## Electrical Safety Promotion Programme Outreach Talk Application Form

Part I - Information of Organisation	
Name of Organisation	:
Address of Visit	;
Number of Participants	:
Grade <i>(if applicable)</i>	:
Suggested Date and Time of Visit	:
Equipment Available from Organisation	: Computer Projector Microphone Speaker ( Please select )
Contact Person's Name	:
Contact Person's Post Title	:
Contact Information	: Tel Fax
Part II - Information of Applicant	
Applicant's Name	;
Applicant's Post Title	‡
Applicant's Signature	: Date :
<ol> <li>Notes:         <ol> <li>The applicant should be at a rank of supervisor or above of the organisation. The Duly completed application form shall be sent by:</li></ol></li></ol>	

Thank you for joining this electrical safety promotional activity -