



HUMAN RESOURCE DEVELOPMENT FUND REIMBURSEMENT FORM

Issue no: 3

1. Employer Details

Name:

Postal Address:

Physical Address

.....

Telephone No: Fax No:

Cellphone No: E-mail:

VAT Registration No: Contact Person(s):

.....

2. Particulars of Training

Title of the course/programme:

Name of Training Institution:

Duration of Training: From: To:
(dd/mm/yyyy) (dd/mm/yyyy)

Total learning hours:

Location of Training:

.....

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3. Breakdown of Course / Training duration

Module/Programme	Trainer Names	Trainer No (if applicable)

4. Training Costs Paid (NB: Tick the appropriate circle)

4.1 Outsourced Training

4.2 In-house Training

Details of the training costs

DETAILS	FILL IN AMOUNT (BWP)	FOR OFFICIAL USE ONLY
Trainer or Tuition Fees		
Trainer's Salary (for In-house Training)		
Trainees Salaries		
Stationery/Training/Learning Material		
Meals and Refreshments		
Transport		
Accommodation		
Others(specify)		
Others(specify)		
TOTAL COST		
Cost per participant		

NOTE: - All claims for trainings completed on or before the 31st March shall be submitted to the Council during the financial year, however employers shall be given a three months grace period up to the last working day of June to submit claims.

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5. Particulars of Trainees

Please give details of employees trained as per table below:

Surname	First Name(s)	Omang No.	Gender	Cellphone Number(s)

(NB: Attach more at the end of this form if need be)

6. Declaration: (To be completed by an authorized Company Representative)

We, the undersigned state that;

- i. The information contained in this application is, to the best of our knowledge, true and accurate.
- ii. We have not withheld/ distorted any material facts.

Name of Processing Officer:

Signature: Date:

Name of Supervisor/Manager.....

Signature: Date:

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7 CHECK LIST

Attached Documents:

Required Documents	Attached? (Tick)	FOR OFFICIAL USE ONLY
Copies of BQA Accreditation Certificate(s) clearly showing programme(s) being claimed for		
Trainer Assessment report		
Copy of Pre-Approval Letter from HRDC for training sourced outside Botswana or training of non- citizen employee(s)		
Invoices, Receipts accompanied by bank proof of payment signed and stamped by the bank showing the payer, payee and amount paid. Payslips accompanied by salary spreadsheet with company logo or stamp		
Certified copies of records of attendance register signed by each trainee for the duration of training		
Original Certified copies of Certificates/ Transcript or Progress Report with Programme written as it appears in Accreditation Certificate attached to their original certified copies of Omang which are valid		
Banking Details Form (If not submitted before)		
Others (Specify)		

Date Application Received:

Date Application Checked:

Application Checked by: