

Verification of Certificate Form

Dear issuing organisation,

Part A - Certificate Holder

Apprentices Trainees Employment Limited (ATEL) has received a certificate issued by your organisation and request that it be verified. To verify the certificate, please complete Part C of this form and email it to the ATEL representative nominated in Part B.

Thank you.

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Name:			
Certificate Title:			
Certificate Number:		Date of Issue:	
Consent:	I give my consent for ATEL to verify the above certificate with your organisation.		
Signature:		Date:	
Part B – ATEL Representative			
Name:			
Position:			
Email:			
Signature:		Date:	
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Part C - Issuing Orga	anisation		
	anisation		
Name:			
Position:			
Verification:	Yes, I can verify the above certificate has been issued by this organisation.		
	No, I cannot verify the above certificate.		
	140, I carmot verify the above certificate.		
Signature:		Date:	