



**MINISTRY OF LABOUR AND HOME AFFAIRS
DEPARTMENT OF EMPLOYMENT SERVICES
MONTHLY CONFIRMATION FORM FOR INTERNSHIP**

SURNAME	NAMES	ID NUMBER	REPORT DATE	INTERN'S SIGNATURE	SUPERVISOR'S SIGNATURE	STATUS (absenteeism, leave etc.)

This confirms the details and service of the interns at (host organization) _____ for the month of _____ year _____. The interns are being confirmed by _____ in his/her capacity as _____ and counter signed by _____ in his/her capacity as _____ at (place) _____

Host Organization stamp

DES stamp

NB: Confirmations are due by the 15th of every month, and the form should be fully completed and accompanied by a covering letter on a letterhead or a Savingram (public sector) . The official stamp and the counter signatures are compulsory and where there is an intern/volunteer status change, kindly indicate in the column.