

SUBSISTENCE ALLOWANCE CONFIRMATION OF EMPLOYMENT

To be completed by the employer

Please use **capital** letters. This document, duly completed, must be sent to eusolidaritycorps@pole-emploi.fr within **15 days** after the first day of work

1 I, the undersigned, hereby certify that the following person has been employed:

Surname:
First name:
Registration of the candidate on the *European Solidarity Corps* portal:
Nationality: Date of birth: / / (dd/mm/yyyy)
Address:
Postal code: (if applicable)..... City: Country:

2 About the job:

Type of contract: Apprenticeship Traineeship
Contract start date: (dd/mm/yyyy)
Contract end date: (dd/mm/yyyy)
Job title:
Company name:
Registration number: Number of employees:
Address:
Postal code: (if applicable)..... City: Country:
Name and title of the contact person:
.....
Phone number: (+.....)
E-mail address:
...../...../ (dd/mm/yyyy) Signature and company stamp: