

## INTEGRATION PROGRAMME APPLICATION FORM

To make your application eligible, you must complete all the fields of the form using **capital letters**. You must submit the documents listed below **before** the start date of the contract and send them to:

[gestionyfej.00137@pole-emploi.fr](mailto:gestionyfej.00137@pole-emploi.fr)

- Proof of the company registration,
- List of participants,
- Proof of identity of the concerned worker(s),
- Copy of the work contract(s) of the participant(s) (minimum duration of 6 months)

### General information

Company name: .....

Registration number: .....

Legal representative:.....

Number of employees:.....

Address of the head office: .....

Postcode:..... City:..... Country:.....

Name and position of the contact person: .....

Phone number:.....

E-mail address: .....

### Integration programme - checklist of training and support activities:

- Basic** induction training (**one** of the following training modules)
- Comprehensive** induction training (**at least one** of the following training modules **combined with** administrative support and settlement facilitation)

	Individual training	Group training
<b>Language training</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Technical training</b>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If Technical training, please specify: .....</i>		
.....		
.....		
<b>Business visits</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Mentoring support</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other</b>	<input type="checkbox"/>	<input type="checkbox"/>
<i>If Other, please specify: .....</i>		
.....		
.....		
.....		
.....		

**Administrative support and settlement facilitation** (mandatory item in the case of a comprehensive induction training)

It can include one or more of the following support items: *residence registration, work permit, relocation, assistance to find housing, assistance to obtain recognition of qualifications, children's schooling, etc. (please specify)*

.....  
.....  
.....

Brief description of the integration programme activities:

.....  
.....  
.....

Provisional duration of the training module(s) (training hours or days per thematic module):

.....  
.....  
.....

Job vacancy (-ies) concerned: .....

.....  
.....

Number of recruited workers: .....

N°	Surname	First name	Date of birth	Nationality	Contract start and end dates
1					
2					
3					
4					
5					

\*Please add as many lines as necessary

Location of the induction training(s):

.....  
.....  
.....

I, the undersigned, legal representative / executive officer (please circle the appropriate option) of the company ..... confirm that the newly recruited mobile worker(s) will start a (please tick as appropriate):

- basic** induction training
- comprehensive** induction training

Within the first **three weeks** of work.

I understand that for reimbursement entitlement from *TMS-Your first EURES Job* to support the costs of the integration programme:

- I must submit the application form describing the integration programme **before** the candidate(s) take(s) up their positions,
- The financial support from *TMS-Your first EURES Job* regarding the costs of the integration programme will be granted **after** the candidate(s) take(s) up their positions,
- The application is submitted to the approval of *TMS-Your first EURES Job*.

Name of legal representative / executive officer:

.....

Date: ..... / ..... / ..... (dd/mm/yyyy)    Signature:

**Approved by the employment/EURES adviser:**

Surname and first name: .....

Signature:

**To be completed by *TMS-Your first EURES Job***

The financial support is  **granted**  **not granted** by *TMS-Your first EURES Job*

Motivation if not granted: .....

Verified by: (e-mail address) .....

Date: ..... (dd/mm/yyyy)

**Amount (EUR):** .....