CNOOC Uganda Limited

LIFTING OPERATIONS AND LIFTING EQUIPMENT TRAINING AND LICENSING APPLICATION FORM				
APPLICANTS FULL NAME		SEX	DATE OF BIRTH D/M/Y	AGE
TELEPHONE		EMAIL		
ORIGIN			NIN	
DISTRICT	SUB COUNTY	PARISH		VILLAGE/LC1
QUALIFICATIONS				
SCHOOL/INSTITUTION	YEAR ATTENDED	QUALIFICATION ATTAINED		
DRIVING EXPERINCE				
PERMIT NO		CLASS	ISSUE DATE	EXPIRY DATE
REFERENCES				
NAME		DISTRICT OF ORIGIN		TELEPHONE NUMBER