

## **CONFIDENTIAL REPORT**

## (To Whom It May Concern) TO BE COMPLETED AND RETURNED DIRECTLY TO THE FSC

Name and address of the former employer's organization:				
2.	Name, address and TRN of the former employee:			
	2.1 Full Name of the former employee:			
	First:	Middle:	Last:	
	2.2 Address of the former employee:			
	2.3 Taxpayer Registration Number (TRN) of the former employee:			
3.	. Period of his/her employment with the above organization:			
	From:	То:		
4.	4. State reason for termination of his/her services			
5.	. Would you re-employ him/her? Give reason for your answer.			
6.	State any other material facts about his/her character not covered by the above answer:			
	The above is a true and correct statement of the facts pertaining to the employment			
All pertinent and material facts have been given.				
General Manager/Managing Director				

Date