



Apprenticeship Training Employment and Development (RATED) Programme  
**TRAINING AND DEVELOPMENT**  
**REGISTRATION FORM**

**Please read carefully before proceeding to complete this application:**

1. The RATED programme is open to **unemployed Virgin Islanders/Belongers ONLY**.
2. If you are employed on a full-time basis, you are **NOT eligible** to participate in this programme.
3. Public Officers are **NOT eligible** to participate in this programme.
4. You must submit a copy of a valid Belonger Card or British Overseas Territory Citizen (Virgin Islands) Passport in support of this application.

**Please ensure that the application form is completed clearly.**

**\*Required Fields (Sections MUST be completed)**

PERSONAL INFORMATION		
*First Name:	*Middle Name:	*Surname:
*Physical Address:		
*Contact Number(s):	Email:	
*Date of Birth (D/M/Y):	*Age:	*Gender:
*Are you a Virgin Islander/Belonger? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If No, please see note #1 above) (NOT ELIGIBLE)</i>		
*Belonger Card No:	*Passport No:	
*Emergency Contact (Full Name and Contact Number): Name: _____ Contact Number: _____		
EMPLOYMENT STATUS		
*I am: <input type="checkbox"/> presently unemployed and not receiving any income <input type="checkbox"/> presently employed on a part-time basis *Place of Employment: _____ *Days of Work: _____ *Hours of Work: Begin: _____ End: _____ <input type="checkbox"/> presently self-employed and not receiving any income <input type="checkbox"/> presently employed on a full-time basis <i>(Please see note #2 above) (NOT ELIGIBLE)</i>		

## SKILLS & WORK EXPERIENCE

**\*Please list your highest level of education attained:**

**\*Please list your work experience, if applicable:** *(May use separate sheet if necessary)*

**\*Programme Pathway:**      Training and Education

## AREAS OF TRAINING INTEREST

If an area of interest is not listed, please indicate in the category 'Other'

\_\_\_ Soft Skills (resume writing, interview preparedness, etc.)

\_\_\_ Plumbing

\_\_\_ Construction

\_\_\_ Agriculture/Fisheries

\_\_\_ Carpentry

\_\_\_ Marine/Yachting

\_\_\_ Electrician

\_\_\_ Other \_\_\_\_\_

**Please list any disabilities you may have:**

**\*Declaration:**

I, \_\_\_\_\_, declare that the information submitted on this form, is accurate to the best of my knowledge. I understand that submission of false information can adversely affect my approval to participate in the RATED Programme. I also agree that if I am selected to attend a training session, I will abide comply with the conditions of training opportunity.

**Signature:**

**Date:**

**Please check all supporting documents attached in support of your application:**

**\*Documents below with asterisk (\*) must be attached to all applications, where applicable.**

Belonger Card\*

Passport\*

**Submit completed application form to:**

*(Please ensure that application is completed as required and all supporting documents are attached)*

Permanent Secretary

Ministry of Environment, Natural Resources and Climate Change

#44 Pusser's Building, Lower Estate, Road Town, TORTOLA

*or*

District Offices located on the Sister Islands