

APPLICATION FORM

Complete the form below
Apprenticeship for Youth in Natural Resources 2024



Ministry of Natural Resources
96 Duke Street, Georgetown
+592-231-2510 (Office)
www.nre.gov.gy.com

● Applicant Details

Write Your Personal Information :

Full Name :
(PLEASE USE CAPITAL)

Place Of Birth : _____ / _____ / _____ Gender : Male Female

Include copy of Birth Certificate with this application

Address & Region : _____

Phone Number : _____ E-Mail : _____

Occupation : _____

School/s attended : _____

In 300 words or less, state why you wish to be apart of this program:

Signature Of Applicant
Date:

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Complete the form below sign up for membership to the big



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● Permission Slip

TO BE COMPLETED BY PARENT OR GUARDIAN

I _____ hereby allow my child _____
to be an apprentice of the Youths in Natural Resource 2024 program offered
by the Ministry of Natural Resources.

*In Case of an emergency, I give permission for my child to receive medical treatment.
Parents or guardians are responsible for their child's vaccination against communicable
diseases or other.*

Relation to Applicant : _____
Phone Number : _____
E-mail : _____

Signature

Date:

● Emergency Contact

Name : _____
Phone Number : _____
E-mail : _____

● Special Instructions

Dietary Restrictions: _____

Allergies/Ailments: _____