

Job Interview Interpreter Grant APPLICATION FORM

Name of Interviewee: P.P.S No.:

Address:

..... D.O.B.:/...../.....

Name of Interpreter:

Address:

.....

Date of Interview:/...../..... Communication needs: Sign Interpreter () Lipspeaker ()

Verification of Job Interview:

Company Name:.....

Address:

.....

Signed: Date:/...../.....

Employer

Position:

Company/Employer Stamp

Interpreter:

Total Fee: €.....

Total Travel Costs: €.....

Details of travel: To.....From..... Mode of Transport:

Signed: Date:/...../.....

Interpreter

Approved by: Date:/...../.....

Employment Services Officer

Approved for

Payment by: Date:/...../.....

Employment Services Manager

Authorised for Payment by: Grade: Date:/...../.....

Finance and Administration

Note: Completed form should be forwarded to your local FÁS Employment Services Offices.