

COMPANY CONTACT FORM

1. Name of Company:

2. Physical Address:

3. Postal Address:

4. Contact person

Email:

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Telephone Number:

Cell Number:

Fax Number:

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5. Please give us a short description of your company and services:

6. Size of company (number of employers):

7. Do you have more than one branch of your company in Cape Town? If so, please specify.



8. Would you be interested in more than one intern at the same time? If yes, please state the number of interns.

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9. Please describe the type of internship your company could offer. Should you be able to offer more than one internship, please use the spaces provided. (Include information regarding department, potential work functions of the intern and possible tasks)

1st Internship

2nd Internship

3rd Internship

10. What qualifications should the intern have? What are your requirements and expectations?



11. Period of internship?(In weeks)

Minimum:	Maximum:
<input type="text"/>	<input type="text"/>

Preferred start date:	Preferred finish date:
<input type="text"/>	<input type="text"/>

12. Extra comments:

<input type="text"/>
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Please send completed form to info@thecapelite.co.za or fax 021 4482169.

Best regards,

Cape Life Team