



To: NZ Marine and Composites Industry Training Organisation (NZMAC ITO)
P O Box 90 448
Victoria Street West
Auckland 1142

Apprentice Claim for Subsidy

Course: _____

Name of Apprentice _____

Employer _____

Employer's postal address _____

Date of Course _____

Course Venue _____

Total amount to claim \$ _____

Apprentice Signature _____

Date _____

Attach and post receipts to the NZMAC ITO Office after completion of the course. Please allow 4 weeks processing time.

NZ Marine ITO Office Use

Date Received _____ Amount Approved _____ Reason for any variation of claim _____

Approved by _____ Date paid _____ Cheque No. _____