

Implementing Organization

Notification Acceptance Form

To:

The Director of the Organization for Technical Intern Training

(Seal)

You are hereby notified that we have accepted your notification of implementation pursuant to the provisions of Article 17 of the Act on Proper Technical Intern Training and Protection of Technical Intern Trainees.

Description

1. Notification acceptance no. of the implementing organization		
2. Date of notification acceptance		Date:
3. Notifying party	① Name	
	② Address	Postal code - <div>(Tel. - -)</div>