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**SKILL DEVELOPMENT**

**COUNCIL KARACHI**

**SKILLS DEVELOPMENT**

**EMPLOYERS’ RECOGNITION AWARD**

**Celebrating and Promoting**

**Employers’ investment in Skills Development**

**CONTEST FORM**

**Submitted by:**

**Company Name:**

**Date:**

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**Section 2 – Evaluation Questionnaire**

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| --- | --- | --- |
| **E-1** | **Training Infrastructure** | **20** |
| **E-2** | **Investment on Training Activities** | **20** |
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| **E-4** | **Linkages with TVET Institutions / Academia** | **15** |
| **E-5** | **Participation in Training Activities under TVET Sector Support Programme** | **25** |

**Total = 100**

**INSTRUCTIONS**

**TO SUBMIT THIS CONTEST FORM, PLEASE FOLLOW THE INSTRUCTIONS BELOW**

* **Complete all questions in honesty & attach all necessary supporting documents**
* **Share the complete Form in**
  + **Soft copy -** WeTransfer or Drive
  + **Hard copy –** Mail/Courier
  + **attach all necessary supporting documents**
* **All entries will be evaluated by the Committee. They may contact for any queries for evidence & fact-finding**

***Confirm your participation by email on*** [***services@efp.org.pk***](mailto:services@efp.org.pk)***, sdckar@sdckarachi.org.pk***

***All entries are subject to our terms and conditions and Committees' decisions will be final.***

***Entries will be processed after receipt of Participation & Processing Fee***

**CATEGORIES AND SECTORS OF AWARD**

Awards will be given in all the three large, medium and small categories in the following sector.

* Automobile
* Retail and wholesales
* Services and Logistic
* Manufacturing
* Information Technology
* Printing and Packaging

\* 1, 2 and 3 Award for all sector.

**ELIGIBILITY**

All employers in Pakistan are eligible for the Award. The enterprise must meet the following criteria.

* Have completed the nomination form.
* Agree to provide additional information and documents if needed.
* Have contributed in skills development of youth and employees.
* Agree to share best practices with other enterprises.

**SECTION 1: COMPANY INFORMATION**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ORGANIZATION** | | | | | | | | | |
| a. | Registered Name |  | | | | | | | |
| b. | Mailing Address |  | | | | | | | |
| c. | Name of Head of Org. |  | | | | | | | |
| d. | Designation of the Head of the Org. |  | | | | | | | |
| e. | Industry/Sector |  | | | | | | | |
| f. | Type/Categories | Multinational | \*Large National | | | \*\*SME | | \*\*\*Micro | |
| g. | Employees/ Manpower | **Category** | | **Male** | **Percentage** | | **Female** | | **Percentage** |
| Management | |  |  | |  | |  |
| Technical Staff/Executives | |  |  | |  | |  |
| Skilled Workers | |  |  | |  | |  |
| Un-Skilled Workers | |  |  | |  | |  |
| **Total Strength** | |  |  | |  | |  |
| h. | Contact Person(s) | Name | |  | | | | | |
| Designation | |  | | | | | |
| Contact No. | |  | | | | | |
| Email Address | |  | | | | | |

\*Large National: Employing more than 250 persons

\*\*SMEs: 50-250 Employees

\*\*\*Micro: 10-50 Employees

|  |  |
| --- | --- |
| **Signature** |  |
| **Name of Authorized Representative** |  |
| **Designation** |  |
| **Date** |  |
| **Stamp of Organization** |  |

**SECTION 2: EVALUATION QUESTIONNAIRE**

***Important Notes:***

* *Please indicate your choice as per the information asked for. All questions listed below must be answered.*
* *Please attach supporting documents and photos where required.*
* *Please mention N/A if the question does not apply to your company.*

|  |  |  |
| --- | --- | --- |
| **TRAINING & SKILL DEVELOPMENT INITIATIVES** | | **Marks = 100** |
| **E.1. Training Infrastructure (20 Marks)** | | |
| 1. Do you have any training policies; if so, kindly attach a copy? |  | |
| 1. Do you have your own training center or training space for the training of youth/enterprises within your premises? If yes, attach details? |  | |
| 1. Do you prepare an Annual Training Calendar for training and skills up-gradation of your employees? If yes, attach details? |  | |
| 1. Do you have a training department or dedicated training officer for training activities? |  | |

|  |  |  |
| --- | --- | --- |
| **E.2. Investment on Training Activities (20 Marks)** | **The year 2019** | **The year 2020** |
| 1. Total amount spent on training activities during last 2 years (%age of total expenses). |  |  |
| 1. Total Training Hours per Employee |  |  |
| 1. Amount spent on skills development of employees (%age of amount spent on training activities). |  |  |
| 1. A total number of employees trained during last two years. |  |  |
| * Within enterprise / In-house |  |  |
| * Got trained through other institutions / Training Programme |  |  |
| * Trainees provided On-the-Job Training or Internship |  |  |
| 1. Amount paid as donation or contribution to any TVET institution. |  |  |

|  |  |  |
| --- | --- | --- |
| **E.3. Apprenticeship / Traineeship / Artisan Training Programme (20 Marks)** | **The year 2019** | **The year 2020** |
| 1. Are you implementing an apprenticeship training program within your enterprise? If yes, number of apprentices (last 2 years) |  |  |
| 1. Are you running any systematic in-house or artisan training programs for employees or youth? If yes, number (last 2 years) |  |  |
| 1. Do you offer internship/on-the-job training to trainees of TVET institutions? If yes, indicate numbers (last 2 years). |  |  |
| 1. Do you offer internships for university graduates? If yes, indicate numbers (last 2 years). |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **E.4. Linkages with TVET Institutions / Academia (15 Marks)** | | |  |
| 1. Do you have established any linkages with TVET Institutions? |  |  |
| 1. Is your organization a member of any TVET Board or Council? Give name |  |  |
| 1. Is any of your employee member of the Institute Management Committees of TVET Institution? Name of Institution |  |  |
| 1. Do you support institutional training by offering industrial visits/lectures/counseling sessions? |  |  |

|  |  |  |
| --- | --- | --- |
| **E.5. Participation in Training Activities under TVET Sector Support Programme (25 Marks)** | |  |
| 1. Are you aware of TVET Sector Support Programme? |  |  |
| 1. Are you a partner to the TVET Reform process under the program? |  |  |
| 1. Have you signed any MoU for training or On-the-Job Training for trainees of the TVET Sector Support Programme? |  |  |
| 1. Is your organization offering a systematic training program under TVET Sector Support Programme within your enterprise? |  |  |
| 1. Number of internships offered to trainees of TVET Sector Support Programme |  |  |

|  |  |
| --- | --- |
| **Signature** |  |
| **Name & Designation** |  |
| **Stamp of Organization** |  |

***Note: Application form duly filled-in with supporting documents may be mailed to:***

**Mail Contest Form to:**

**Mr. Muhammad Faraz**

**Skill Development Council Karachi**

**C-95, Block-9, Gulshan-e-Iqbal,**

**Near Federal Urdu University,**

**Karachi**

**E-mail:** [**sdckar@sdckarachi.org.pk**](mailto:sdckar@sdckarachi.org.pk)

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