

**WOT VOCATIONAL TRAINING AGREEMENT**

I, \_\_\_\_\_, agree voluntarily to attend my chosen vocational training in \_\_\_\_\_ on Monday-Friday for six hours a day.

I understand that training hours may be canceled and rescheduled as necessary. I understand that I will receive 40,000 GNF per month from the WOT program. This amount is subject to change if ARC's budget situation changes.

I understand and agree that each unexcused absence will result in a 5,000 GNF deduction from my monthly stipend of 40,000 GNF.

I understand that I must pay back my debt for any items bought from other groups on credit as soon as I get my stipend.

I understand that if I choose to resign from the program or am expelled from the program, I forfeit any right I have to my stipend or training materials.

I understand and agree that I may not sell or misuse the training materials disbursed to me or my training group by the WOT program.

Signed by WOT Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Witnessed by WOT Program Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by WOT Program Advisor: \_\_\_\_\_ Date: \_\_\_\_\_