

Please fill the form where applicable.

SCHEDULE (I)

PROJECT/BUSINESS NAME	
NAME OF THE REQUIRED ASSIGNMENT	
DESCRIBE THE REQUIRED ASSIGNMENT	
FINANCIAL PERIOD	
PURPOSE OF THE ASSIGNMENT AND USERS OF THE REPORT	
PHYSICAL, POSTAL, EMAIL, TELEPHONE CONTACTS	

SCHEDULE (II)

DELIVERABLES	(a) (b) (c)
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SCHEDULE (III)

DISCRIPTION	START DATE:	END DATE	DAYS
ASSIGNMENT PERIOD			
TEAM PLANNING MEETING			
CLIENT BRIEFING MEETING			
EXECUTION			
DRAFT REPORT & REVIEW			
SUBMISSION OF THE REPORT/DELIVERABLE	DATE:/...../.....		

SCHEDULE (IV)

FACILITATION	(a) FEES	
	(b) DISBURSEMENT	
	(c) CONTACT PERSON	
	(d) INFORMATION/DOCUMENT REQUIRED AS PER <i>schedule (v) overleaf</i>	
	(e) OTHER FACILITATION	

I / (We).....on behalf of person(s) whose particulars are listed in *schedule (i)* above, request PTP to provide the service(s) indicated in the same schedule with the sole purpose of delivering output(s) indicated in *schedule (ii)* to me/us within the period indicated in *schedule (iii)* and we have provided resources requested in *schedule (iv)* of this form to PTP for purposes of this engagement. SIGNED ON THIS DAY OFMONTH OF YEAR..... SIGNATURE (S).....

I / (We)on behalf of PTP, declare that we are able, willing and accept to provide the service requested and confirm that all applicable and relevant requirements of the schedules of this engagement form have been met. SIGNED ON THIS.....DAY OF.....MONTH OF YEAR.....SIGNATURE(S).....

SCHEDULE V- LIST OF INFORMATION REQUIRED (*Attachment*)