

# In-house course request form

Contact name of person organising the training: \_\_\_\_\_

Position/Department \_\_\_\_\_

Name of Organisation \_\_\_\_\_

Please indicate the type of organisation:

Public Sector/Voluntary Sector

Private Sector

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Tel \_\_\_\_\_ Email \_\_\_\_\_

Course(s) required \_\_\_\_\_

Location where training is expected to be held \_\_\_\_\_

Timescale/range of preferred dates for training \_\_\_\_\_

Anticipated number of delegates \_\_\_\_\_

How did you hear about our training courses? \_\_\_\_\_

I have read and accept the terms and conditions (see prospectus)

Please list your main aims and objectives for the training:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please tell us about the expected delegates' level of knowledge on this subject and their type of jobs/roles (paid/voluntary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_