

External Training Application

Please ensure all sections (1-6) are completed before submitting your application

1. PERSONAL DETAILS

a	Full Name		Job Title	
b	Payroll Number		Telephone Number	
c	Email Address			
d	Project Name		Project Cost Code	
e	Line Manager		Job Title	

2. LINE MANAGER DETAILS (to be completed by the authorising line manager/ senior manager)

a	Line Manager Name		Job Title	
b	Line Manager E-mail Address			
c	Line Manager Contact Number			

Delegate Name		Sign		Date	
Manager Name		Sign		Date	

3. COURSE DETAILS

a	Course name		Date & Length of Course	
b	Qualification Gained on Completion			
c	Time(s) and venue of course (NB Please ensure that you are able to travel to venue before you request training)		Please attach details of content of course and cost (NB Applications cannot be processed without these details)	
d	Organiser name			
	Organiser Address & Telephone Number			
	Course Cost - If course is free, please state whether or not there are any fees for non-attendance/ non-completion			

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e	Travel needed?	Yes / No	Cost		
	Hotel needed?	Yes / No	Cost		
	Will any study days be needed?	Yes / No	How many?		Frequency

4. BUSINESS OBJECTIVES (this must be completed for the application to be considered)

My attendance on this course will benefit my service and service users in the following ways –

5. PERSONAL OBJECTIVES – LEARNING OUTCOMES (this must be completed for the application to be considered)

My attendance on this course will enhance my CPD (Continuous Professional Development) in the following ways –

6. SUPPORTING STATEMENT FROM LINE MANAGER (this must be completed for the application to be considered)

My staff attendance on this course will enhance my business/service users' lives in the following ways