

Training Booking Form– External
(Please ensure that ALL fields are fully completed)

Name	
Job Role	Foster carer
Workplace Name	
Workplace Address	
Contact Telephone No	
E-Mail Address	
Title of course	
Preferred course date(s) Please leave blank if a specific date is not known and you are looking for the next available opportunity.	
Course dates you are not available to attend (if known)	
Venue or location of course	
Duration of course	

The completion of this application form does not guarantee that we will be able to support your request.

Please tick what priority you would give to this training need:

		Tick
Priority 1	Urgent Requirement. Individual is unable to carry out their role effectively without this training	
Priority 2	Non-urgent requirement. Individual would be more effective in their role with this training but could continue to contribute without the training	
Priority 3	Non-urgent personal development. Individual would like to undertake training for personal development but it may not be relevant to the needs of the business or the individual's current role at this time	

I confirm that I have read the Aims and Objectives of the course with my line manager. I agree with the course objectives we have detailed above.

Candidate's name:	Date:	Line manager's name:	Date:
_____	_____	_____	_____

Please e-mail the completed form to trainingapplications@wirral.gov.uk

Revised 10/2015