

7304 CTLLS Course Booking Form



Wilplan Training Ltd.

Security Industry Training Consultants



Student ID (Office Use Only)

Please complete in block capitals and return to Wilplan Training, Park Hall, Park Hal Rd, Charnock Richard, Chorley, Lancashire. Tel: 08450 095647 Int: (0)1257 733003 Web: wilplantraining.co.uk

Company Details

Company Name.....	Address.....		
Postcode.....	Contact Name.....	Title e.g Mr / Mrs / Ms.....	
Tel No.....	Fax.....	Email.....	

Delegate Details for Joining Instructions and Registration * (Must be completed in full)

First Name(s).....		Surname(s).....	
D.O.B:...../...../.....		Home Tel:..... Mobile:.....	
Work Tel:.....		Email:.....	
Address.....		Town.....	
County.....		Postcode..... Country.....	

Delegate Support * (Please contact us if you wish to discuss this further or have any questions prior to booking)

To assist us in supporting you during the course please tell if any of the following apply:

Dyslexia Hearing Impairment Visual Impairment Mobility Difficulty Other

Course Details

Start Date	Location

Accommodation Requirements * (Courses held at Park Hall, Chorley Only. Single Room Including Bed Breakfast & Evening Meal £52.00 PPPN. Twin Room (based on 2 Sharing £82.00 PN) For other Locations please contact us for Accommodation Rates

Arrival Date	Departure Date	No of Nights
Single Room Twin	Twin Room (Please give name of person sharing)	

Payment Method

Cheque or postal order enclosed for the full amount payable to Wilplan Training Ltd	<input type="checkbox"/>
Card Payment made via telephone	<input type="checkbox"/>
BACS Transfer to Wilplan Training Ltd – Co-operative Bank, Sort Code 089250 Account: 70198913	<input type="checkbox"/>
Please invoice us - Purchase Order No.....Amount.....	<input type="checkbox"/>
(Credit Account Holders Only)	

I confirm that the information given is accurate and and that I agree to the Terms and Conditions of Booking.

Signature	Date
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7304 PTLLS Course Booking Form

Initial Assessment (This section must be completed by the candidate)

First Name(s).....Surname(s).....
Mobile:.....Email:.....

In order to be accepted on to this course you must complete the questions below giving as much detail as possible.

Please describe what experience you have of using computer based software packages to produce documents such as Microsoft Word, PowerPoint or other applications?

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Please describe your current role or intended role relating to teaching.

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Do you currently hold a level 2 or higher in literacy?

Do you currently hold a level 2 or higher in numeracy?

If you do not hold a level 2 in literacy and numeracy you may be required to complete this in order to achieve the qualification.

I have enclosed a copy of my PTLLS qualification with this booking form

I confirm that I have access to 30 hours of teaching practice