Course Application Form

Candidate Information

Title Mr ☐ Mrs ☐ Miss ☐ Ms ☐

Surname:

First Name/s:

Date of Birth: / / **NI Number:** ☐☐☐☐☐☐☐☐☐

Mobile Number:

Course Information

Course Name:

Course Date:

Course Venue:

Company Information

Company Name:

Company Address:

Postcode:

Do you require an invoice? :
Yes / No

Purchase Order Number:

Telephone Number:

Email Address:

Signature: **Contact Name:**

Terms & Conditions

Applications **must** be received at least three weeks prior to commencement of the course.
An invoice will be raised for this payment when places are booked. **Certificates will only be issued on receipt of payment for this course.**
SITF reserve the right to cancel the course if there are insufficient candidates.
SITF reserve the right to charge the full cost of the course in the event of cancellation by the company or 'no-show' by the candidate.
Written confirmation of a place on this course will be sent to the company contact and the candidate's home address
Companies in-scope can claim Grants direct from ConstructionSkills. Grant Claim Forms can be downloaded from www.citb-constructionskills.co.uk/grant - Please expect certificates at least 2 weeks after your course. They will be sent to the individual company for distribution

Please return this form to: SITF, 411 Limpsfield Road, Warlingham, Surrey, CR6 9HA
or email to Sabrina Crozier sabrina@shopfitters.org

Telephone Number: 01883 624961 Fax: 01883 626841 website: www.sitf.org.uk