



GUYANA NATIONAL BUREAU OF STANDARDS

TRAINING REQUEST FORM Face to Face

Please mail or fax to: **The Executive Director,
Guyana National Bureau of Standards
Flat 15 Sophia Exhibition Complex
Georgetown, Guyana
Telephone: 592-219-0062, 219-0064-0066
Fax: 219-0070 E-mail: info@gnbsgy.org**

Name of Contact Person: _____

Company: _____

Address: _____

Telephone: Fax: E-mail:

Course Title: _____

_____ Course Date: _____

Name of Participant	Designation	Vegetarian	Level of Staff
		<input type="checkbox"/>	
		<input type="checkbox"/>	

Note: If more than Two (2) participants kindly attach a supplemental sheet with participant information.

Method of Payment:

- Cheque Enclosed:** (payable to): GUYANA NATIONAL BUREAU OF STANDARDS
- Cash:**
- Bank**

Please do not send cash in an enclosed mail.

Signature:

How did you hear about this course?

- Invitation:
- Referral:
- Other advertisement (please specify):
- Other source (please specify):

I consent to GNBS collecting and using the above information to register me in the seminar/course outlined and to periodically send me material on related training programmes.

CANCELLATION POLICY:

Cancellation requests received more than 7 working days before the start date of the training programme will receive a full refund of the course fee minus a \$5,000 administration fee. Cancellations requests received within the 7 working days before the start date of the course will be non-refundable. GNBS reserves the right to cancel any training programme and will, in such event, fully refund all registration fees. No liability is assumed by the organisers for changes in course dates, content, speakers of venue.

SEMINAR TRANSFER POLICY:

Registrants will be permitted one course transfer without charge, provided notification of transfer is received at least 7 working days in advance of the new course start date. Transfer requests received less than 7 working days in advance of the new course start date will be assessed by an administration fee of \$5,000.

SUBSTITUTION POLICY:

Substitutions of participants will be permitted at any time prior to the start of the course. Please ensure that any substitute participants meet the pre-requisite requirements, if any, for the course.

TRAINING INFORMATION TO BE COMPLETED IF CUSTOMER IS REQUESTING ON-SITE TRAINING PROGRAMME;

Title of the course : _____

Objective(s) of the course: _____

Number of participants(20 is the maximum recommended): _____

Level of participants within the organisation: _____

Please attach supplemental sheet detailing the name(s) of participants and their functions in the organisation.

Are the participants familiar with the requirements of the standard or area proposed for training? _____

Do you have copies of the standard at your organisation (photocopying of standards is prohibited)? _____

Will you provide the following for the conduct of the training programme. Please indicate with a tick on appropriate answer:

- Lap top computer Yes No
- Multipurpose projector Yes No
- Training room Yes No
- Flip charts :One Two None
- Flip chart stands: One Two None
- Printed copies of manuals for each participant on receipt of a Master copy from the GNBS one (1) week prior to the conduct of the training programme_ Yes No
- Mid morning and mid afternoon snacks and lunch for the participants and trainers Yes No

FOR OFFICIAL USE ONLY

Date received: _____ *Received by:* _____

Date evaluated: _____ *Evaluated by:* _____

Applicable Only for Customized Training

Selected Trainer(s) _____

Trainer(s) Acknowledgement _____ *Date:* _____