

Training for Personal Assistants Booking Form

Date of Course 13th & 17th October 2016

Name

Address

Post code

Tel

Email

Date of Birth

Do you already have an Individual Learning Account?

YES NO

Please give details/ ILA no.

.....

If No, do you wish to apply for one Yes

or, please circle or delete below option for a place on the course)

Big Lottery Employer Self Funding

Do you have any specific access training requirements? (e.g. handouts in large print etc.)

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Lunch will be provided on the day. Please indicate any specific dietary requirements.

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Do you need a permit to work In the UK?

((please circle or delete)

YES NO

If YES, do you have one? YES NO (please circle or delete)

Signature..... **Date**.....

Please complete this form and return with your **Individual Learning Number**

Training Project Manager/Training Officer
Lothian Centre for Inclusive Living
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Edinburgh, EH7 5QY