

## Approval of training

## **Application form**

Your details

First name:	
Last name:	
Job title:	
Organisation:	
Address:	
Telephone:	
Email:	
Date of application:	
Course details*	
Course title:	
Course length (days):	
Course description (100 words):	
Target audience (organisations, secto	rs, disciplines, experience):



Course details continued	*
Method of course delivery (class, onl	ine, workshop, other):
Date course/learning established:	
Cost of course/learning per delegate:	
Number of times course will run each year:	
* Please complete separate application	forms for each course (if applicable).
Multiple course submission	on
months, please list the additional cou	
List of countries/territories	where course will be hosted
Australia (Yes/No):	
Europe (Yes/No):	
Malaysia (Yes/No):	
New Zealand (Yes/No):	
North America (Yes/No):	
Singapore (Yes/No):	
South Africa (Yes/No):	
UK (Yes/No):	
Global (Yes/No):	
Other (please state):	

Advancing the profession and course purpose		
Indicate how your course will advance the profession and the chemical, process and biochemical industries. Please consider the following points:		
<ul> <li>Is there evidence that the course fills an unmet need?</li> <li>Is this a new/emerging technology that people need to know about?</li> <li>Is this a fundamental technology that certain groups need to be trained in?</li> <li>Is this a current or future issue affecting a particular segment of relevant industries?</li> <li>How many people need the training / learning?</li> </ul>		
Any other comments?		

Course outline*	
Course outline*	
Provide a list (bullets) of the main topics, sections and content covered by the course:	
* Please send a copy of the technical programme with your application.	
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Learning outcomes	
Learning outcomes  Provide a list (bullets) of the main learning outcomes delegates will receive:	

About the course presenter(s)	
Provide a short biography (150 words) for each of the presenters or leaders responsible for delivering the course / learning:	
References   delegate feedback	
References   delegate feedback  Provide at least two professional references for each course presenter or leader. The reference should include levels of technical or instructional expertise. Attach relevant delegate feedback with your application, if applicable:	
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Other information
Use this section to provide any other relevant information to support your application:
Internal use only
Date application received:
Non-disclosure agreement signed:
Date payment received:
Peer review date:
Feedback date:
Result (Pass/Fail):
Approval start date:
Approval end date: