

## APPENDIX 22 – STAFF EXTERNAL TRAINING APPLICATION FORM

Please complete and hand to your Line Manager who will then pass it on to the Director of Corporate Services and then on to the Human Resources Officer.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Course Title: \_\_\_\_\_

Course Centre: \_\_\_\_\_

Dates: \_\_\_\_\_ Year (if ongoing) \_\_\_\_\_

Cost: £ \_\_\_\_\_ (including exam fees)

I request NICVA's assistance:

Grant: £ \_\_\_\_\_

Paid time off: \_\_\_\_\_ Unpaid time off: \_\_\_\_\_

Signed: .....

Director of Corporate Services

I undertake to observe NICVA's conditions of:

- (i) Reporting on course progress and evaluation.
- (ii) Reimbursing NICVA's grant if I abandon the course.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**To: Director of Corporate Services**

Grant Paid: £ \_\_\_\_\_ on: \_\_\_\_\_

Salary deductions made on any outstanding balance: YES/NO

Amount: £ \_\_\_\_\_