



Training. Consulting. Research

Nomination Form

Course Title: _____

Date & Duration: _____

Name of Nominating Organisation: _____

Address of Nominating Organisation: _____

Nominations (FILL IN THE NAMES IN CAPITAL LETTERS & UNDERLINE THE SURNAME)

S/N	Name of participant	Qualification	Position in Organisation	Telephone	E-mail address
1					
2					
3					
4					
5					
6					
7					
8					

Fees

Fees per participant: _____

Total Nominations: _____

Total Fees payable: _____

Mode of payment:	Cash	_____	Cheque	_____	Bank Draft	_____
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Name of Nominating Officer: _____ Position: _____

Tel Number: _____ Signature & Date: _____

Terms and Conditions

Completed nomination form will be taken as confirmation of nominations and must be returned no later than 3 working days before the commencement date. Payments of fees should be in cash or certified cheque or bank draft in favour of FITC before commencement date or on arrival at the venue.

The information contained herein are only for nomination purposes. This will help in producing all relevant course materials for the nominee(s). FITC and its personnel will protect any personal data entrusted to us through the completion of this form in a way that respects the privacy of individual or entity completing the form.

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