

Training Needs Analysis & Request for Quotation

Thank you for your enquiry into Intertek Academy training courses.

Please assist us in meeting your needs and expectations by taking a few moments to complete this form. This will help us to ensure we quote you on the correct training courses for in-house training.

Name of Company (Full trading name please)		
Name of Contact Person/s		
Contact Details		
Telephone:	Email:	
Fax:	VAT No:	
Cellphone:	Co. Reg No:	
Postal address:	Physical Address: (Where training will take place)	
Why do you need this training?		
What training courses do you require?	Level of learner e.g. shopfloor, supervisors, middle management, top management	Number of people to be trained?

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Requested Dates <i>(We will try our best to accommodate these but bookings are only confirmed on acceptance of quote and receipt of company order number)</i>
Company working hours
Additional requests or information

Name:	Signature:	Position in company:

Referred by (please advise who referred you to Intertek for training):

Please send this completed form to training.africa@intertek.com

We value the opportunity to provide you with a quote, and one will be sent to you shortly.

For office use only			
Date of enquiry:		Quote number:	
Date quote sent:		Quote accepted:	
Name of presenter:		Confirmed dates:	