



Training Registration Form

Fill in where applicable

Name and Surname: _____

Nationality: _____ ID Number: _____

Date of Birth: _____ Sex: Female ☐ Male ☐

Marital Status: Married ☐ Single ☐ Divorced ☐ Widowed ☐

Cellphone Number: _____

Email Address: _____

Sector:

- Non-Governmental Organization
- Government
- Private sector
- Other _____

Employer: _____

Occupation: _____

Occupation Level: _____

Work Address: _____

Work Contact: _____



Education (Starting with the highest level)

Name of Institution	Degree Programme	Year

Selected Course:

- ☐ Program Planning, Monitoring and Evaluation
- ☐ Entrepreneurship
- ☐ Volunteerism and Internships
- ☐ Understanding UN systems, NGO, Private and Public Sectors m
- ☐ Information Technology Basics e.g Excel, SPSS, Power Point, NVivo
- ☐ Sustainable Development Goals (SDGs)
- ☐ Proposal and Report Writing

What's do you expect to benefit from the training session(s)?



Terms and Conditions

Fees

- In-order to attend the training one should have made a full payment for a module
- Fees are subject to change

Payment Terms

- Payments are strictly via bank deposits or transfers
- Payments should be made a week before the commencement of the training
- Proof of payment should be provided (scanned or dropped in person) immediately after payment is made

Cancellation and Transfers of Registration

- You may cancel your registration by notifying EMCAD should you change your mind or decide not to take a module. This should be done a week prior to commencement
- Notifications of cancellation should be submitted in written form a week before the commencement of the training
- EMCAD will grant a 50% refund on payments made for all cancellations
- If you decide to discontinue training at any point after commencement date, there will be no refund
- However, you may transfer your registration if full payment has not been made by the cut-off date which is a week before commencement
- Should you notify EMCAD of your request to transfer your registration after the cut-off date, your payment will be forfeited
- Cancellation and Transfer forms are available online or at EMCADs offices

☐ I have read and agree to the above Terms and Conditions

Signed: _____ Date: _____



(For Office Use Only)

Payment Verification

☐ Verified ☐ Unverified

Approval of Registration

☐ Approved

☐ Denied

Reasons for denial:

Approved/Denied by: _____

Designation: _____

Signature: _____ **Date:** _____
