

Elite Training Academy
Elite House
558-564 Manchester Road,
Bradford, BD5 7LR

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Door Supervision Course Enrollment & Registration Form

APPLICANT INFORMATION (please fill in using black / blue ink)

Forename:		Middle name:		Surname:	
Street Address:			City:		
County:			Post Code:		
Contact No:		Date of Birth:	Passport Number:		Driving Licence No:
Email address			Bank Name:		Other Utility Bills
Previous employment history:				NI Number:	
Qualifications:				Nationality:	
Do you have any First Aid Qualification? if so give details					
Have you been convicted of any criminal offence in the last 10 years? If yes please give details					
Are you authorised to work in the UK					
Can you understand, read and write in English? Please tick.		Yes / No			
Do you have any disability? If yes please provide details:					
Trainer Assessments:			Trainer Comments:		

DISCLAIMER AND SIGNATURE (please read and sign below)

I certify that my answers are true and complete to the best of my knowledge.
 I understand that false or misleading information is viewed by Elite Training Academy Ltd as fraud and my Course Qualifications will be invalidated immediately. ETC reserves the right to change the dates and venue of the course and the alternate details will be notified to you.
 EVC can also cancel the course batch anytime for operational reasons, in which case you will be placed in the next available batch.
 All fees must be paid in full before the start of the course.

All Fees paid are non-refundable

Signature.....

Date.....

COURSE DETAILS: EDEXCEL LEVEL 2 FOR DOOR SUPERVISORS (office use only)

Course Start Date:		Examination Date:		Tutor:		Assessor:	
Centre Manager:		Training Administrator:		Unit 1 Exam Ref No:		Unit 2 Exam Ref No:	
Batch No:		Candidate ID:		Pass / Fail / Re-sit			

Please tick on the following boxes below and sign and print your name at the bottom of the page.

Candidate Responsibility

Complaints and Appeals Procedure

Equal Opportunity Statements

Health and Safety Procedures

By ticking the boxes you confirm that you have understood the above.

Print Name:

Signature:

Date: