

**TRAINING NOMINATION FORM**

ADVANCED EXCEL TRAINING

|  |  |  |
| --- | --- | --- |
|  | Company/Organisation |  |
|  | Location/Address |  |
|  | Telephone |  |
|  | Email |  |
|  | Contact person |  |

**LIST OF PARTICIPANTS**

|  |  |  |  |
| --- | --- | --- | --- |
| SN | NAME | CONTACT | EMAIL ADDRESS |
| 1 |  |  |  |
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**Cancellation policy**

Cancellation or transfer requests should be made in writing (Letter or email) and reach [HEC](http://www.clearfocusconsult.com/) office 7 days before the Training date, otherwise a 50% fee will be charged on cancellation. All bookings will be accepted as confirmed.

**MODE OF PAYMENT**

Payment should be done before the workshop date by RTGS, EFT or Cash in the name: **Houston Executive Consulting Limited** on Account Number **0100625935**, Housing Finance Bank, Kampala Road Branch.

Nomination form to be sent to: **robert@heconsulting.us** **or** **info@heconsulting.us**

DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STAMP & SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Training expectations**

Please list expectations for the training;