To attend an Assessor Training Course, complete this form and return it to Connexis no later than 10 working days prior to the course date.

Email: [quality@connexis.org.nz](mailto:quality@connexis.org.nz)

Post: Quality Assurance, Connexis, PO Box 2759, Wellington 6011

For further information or assistance in completing the form, please contact us at the above email address or call us on 0800 486 626.

## Assessor Training Course Details

|  |  |  |  |
| --- | --- | --- | --- |
| Assessor Course Location: |  | Date: |  |

## Candidate Details

|  |  |  |  |
| --- | --- | --- | --- |
| First name(s): |  | Title: |  |
| Surname: |  | Preferred Name: |  |
| NSN number: |  | Date of Birth: |  |
| **OR**  Drivers Licence/Legal ID: | Copy of driver licence/ID attached | Industry | * Civil * Electrical * Telco * Water |

|  |  |  |  |
| --- | --- | --- | --- |
| Home address: |  |  |  |
|  |  | Post code: |  |
| Home phone: |  | Email: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name: |  | Work phone: |  |
| Company Work Address: |  | Mobile: |  |
|  |  | Company Email: |  |

## 

## Cost

**Cost per person is $550 plus GST**. Please provide a purchase order number for invoicing.

|  |  |
| --- | --- |
| Details for invoice: | Purchase Order No: |

## Cancellation

Cancellations or transfers to another course at late notice can impact the running of the course. We accept cancellations and transfers to courses scheduled more than 10 working days in advance of the course without any charge.

If your cancellation or transfer is received at short notice the following charges may apply.

|  |  |  |
| --- | --- | --- |
| **Notification received** | **Charge** | **Refund** |
| 10 or more working days prior | No charge incurred | Full course fee refund |
| Between 5 to 10 working days prior | 50% course fee charged | 50% course fee refunded |
| 5 working days or less prior | Full course fee charged | 0% course fee refunded |

## Privacy

Upon signing the below declaration, I hereby agree to Connexis accessing my NZQA Record of Achievement.

## Declaration

I have read the cancellation and privacy policy and agree to the terms.

Signature............................................................................ Date