



## Registrar Application to attend external course

Prior to attendance of course, your application needs to be approved by the Director of Training for guaranteed reimbursement of costs incurred.

### Registrar details

Name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Best telephone contact: \_\_\_\_\_

Email: \_\_\_\_\_

### Course details

Name/topic: \_\_\_\_\_

Date/s: \_\_\_\_\_

Location/Venue: \_\_\_\_\_

Cost: \_\_\_\_\_

Learning Objectives: Please list atleast 3

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

Registrar signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only:		
Decision -	Approved: <input type="checkbox"/>	
	Declined: <input type="checkbox"/>	Reason: _____

Director of Training signature: \_\_\_\_\_ Date: \_\_\_\_\_