## **REGISTRATION FORM**

## Royal Naval Leadership Academy



**»** 

## **RNLA COACHING AND MENTORING COURSE**

Registration for, or successful completion of, a CMI qualification by Armed Forces personnel will result in an automatic offer of 12 months free membership. Details will be emailed once a qualification is awarded.

| WANDATORT INFORWATION  |                                      |                                |   |
|--|--------------------------------------|--------------------------------|---|
| CENTRE NAME  | RNLA                                 |                                |   |
| CENTRE /COURSE CODE  | C10388543                            |                                |   |
| COURSE NUMBER  |                                      |                                |   |
| 0011005 04750  |                                      |                                | _                                       |
| COURSE DATES   |                                      |                                |   |
|  |                                      |                                |   |
|  |                                      |                                |   |
| » PROGRAMME DETAILS AN   | ID OPTIONS                           |                                |   |
| Certification requires confirmation of s   | successful course completion. Costs  | subject to periodic revi       | iew and VAT at                          |
| current rate and may change. <b>No add</b> qualification which does not require yo | litional work required. You can app  | ly for the current accre       | edited<br>that Standard                 |
| Learning Credits will not be eligible  |                                      | Civii. Tin <b>s w</b> in incan | that Otanian a                          |
|  |                                      |                                | Select relevant                         |
|  | n Management Coaching and            | £89.00 inc                     | qualification(s) by                     |
| C&M Mentoring (3C2V2) with   | 13 credits / 130 hours TQT           | VAT                            | putting 'X' in the bo                   |
|  |                                      |                                | _                                       |
| -  | r, please indicate your membership   |                                |   |
| number:  |                                      |                                |   |
|  |                                      |                                |   |
| 2 Service number:  |                                      | nk:                            |   |
|  |                                      |                                |   |
|  |                                      |                                |   |
| » CONTACT DETAILS  |                                      |                                |   |
| 4 Title: 5 Surnan  | ne (to appear on certificate): 6     | Forename(s) (to appe           | ar on cortificato):                     |
| 4 Title. 5 Surnan  | tie (to appear on certificate).      | rorename(s) (to appe           | ar on certificate).                     |
|  |                                      |                                |   |
|  |                                      |                                |   |
| 7 Mala Famala  | <b>8</b> Date of Birth* Γ            |                                | , |
| 7 Male Female  | 6 Date of Birth                      |                                | '                                       |
|  | * Required for web access            |                                |   |
| 9 Mailing Address: Important:  | This is the address to which your ce | rtificates will be sent. I     | t is your                               |
|  | ty to inform the CMI should you char |                                | ,                                       |
|  |                                      |                                |   |
|  |                                      |                                |   |
|  |                                      |                                |   |
|  |                                      |                                |   |
| Civilian Telephone (incl dialling code)  | :                                    |                                |   |
|  |                                      |                                |   |
| Email:   |                                      |                                |   |

## 10 Ethnic Origin

| White UK    | White other (known)      | White European | White, type not |  |
|-------------|--------------------------|----------------|-----------------|--|
| Heritage    |                          |                | known           |  |
| Pakistani   | Indian                   | Black African  | Chinese         |  |
|             |                          | heritage       |                 |  |
| Bangladeshi | Black Caribbean heritage | Black, other   | Other (known)   |  |

| 11       | In which language is yo  | our assessment being underta                                     | iken English Welsh En   | glish/Welsh  |
|----------|--------------------------|--|---|--------------|
| 12       | I am happy for you to c  | contact me about CMI matters                                     | on the above number/s (please tick box)                             |              |
| 13       | I am attaching evidenc   | e of successful completion of I                                  | my training   |              |
| <b>»</b> | PAYMENT OPTIONS          | S  |   |              |
|          |                          | cepted if accompanied by the a<br>ingly: (Please note Solo and E | appropriate fee. You can pay by cheque or lectron are not accepted) | debit/credit |
| a.       | Cheque:                  | Cheque number:   | Cheques made payable to CHA<br>MANAGEMENT INSTITUTE                 | RTERED       |
| b.       | Debit/Credit card:       | Debit/Credit Card number:  |   |              |
|          | 3 Digit Security<br>Code |  | Card Expiry Date:   | ssue No:     |
|          |                          |  |   |              |
| 14       | Signature                | Date:  | Daytime telephone number  | er:          |

Registration Checklist: Have you..?

- Completed and signed the Registration Form
- Attached the appropriate remittance (cheque or completed credit/debit card details)
- Attached copy of your end of course completion certificate signed by an SO2

Incomplete forms or missing attachments will trigger return and consequent delays.

Allow 6 weeks from submitting registration for receipt of certification.

Please forward these documents to:

Customer Service Administrator (MoD); Awarding Body; Chartered Management Institute; Management House; Cottingham Road; Corby; Northamptonshire; NN17 1TT

Or by fax: 01536 406810

Any queries please contact us on 01536 207496 or mod@managers.org.uk

In submitting this form, you are consenting to receive marketing information about the CMI's products and services. If you wish to opt out of this arrangement, please visit the CMI's data protection site: <a href="https://www.managers.org.uk/dataprotection">www.managers.org.uk/dataprotection</a>

Those who are eligible will be able to apply for **Chartered Manager**, the highest accolade in managerial competence; for more details log on to: <a href="http://www.managers.org.uk/individuals/become-a-member/get-chartered">http://www.managers.org.uk/individuals/become-a-member/get-chartered</a> or call the Chartered Manager Team on **01536 207429**