



## FICAC Pre-Assessment Training Application Form

### TITLE: FINANCIAL INVESTIGATIONS TRAINING

Training Venue: \_\_\_\_\_ Date: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Time: \_\_\_\_\_

Job Title or Designation: \_\_\_\_\_ Gender: Male  Female

#### 1.0 PROFESSIONAL QUALIFICATIONS *(List from highest qualification)*

No	Qualification Attained	Institute/University	Majors	Year
1				
2				
3				

#### 2.0 SHORT COURSE(S) & WORKSHOPS *(List relevant Financial & Investigation courses attended)*

No	Name of Course	Duration	Dates	Institution	Country
1					
2					
3					

#### 3.0 WORK EXPERIENCE *(for last 5 years – list from recent employment)*

No	Name of Employer	Duration	Position	Main Duties
1				
2				
3				

**4.0 RELEVANCE OF THIS TRAINING TO YOUR CURRENT JOB DESCRIPTION IN YOUR ORGANISATION?**

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**5.0 WHAT IS YOUR AREA OF INTEREST AND EXPECTATION OF THIS TRAINING?**

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**6.0 PERSONAL PREFERENCES**

**SPECIAL DIETARY REQUIREMENT(S): YES/NO (PLEASE CIRCLE)**

**If Yes, explain:**

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**FOOD ALLERGIES: YES/NO (PLEASE CIRCLE)**

**If Yes, explain:**

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**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

