

Trainers Course



Please ensure that all sections are completed in BLOCK CAPITALS. You may continue on additional paper if required.

Title: (Mr, Mrs, Miss etc)		Surname:		Forenames:	
All Previous Surnames: e.g. Maiden Name (if Applicable)				Date of Birth:	
Address:					
				Postcode:	
Tel No. (Home):			Tel No. (Mobile):		
Email:					
Age:		Nationality:		National Insurance No.:	

Address to which correspondence regarding this application should be sent to if different from home address

Address:	
	Postcode:
Business or Occupation:	Name of Business/Employer:
Address of Business/Employer:	
	Tel No. (Business):

Name and address of previous employer if you have been with your current employer less than 12 months

Previous Employer Name:		Previous Employer Tel No.:	
Previous Employer Address:			

I will be attending *Module 1, *Module 2, *Module 3 of the Trainers Course at the Northern Racing College on:

Date: (Module 1: Racehorse Management):
(Module 2: Business Skills):
(Module 3: Staff Management):

*Delete as necessary.

Please ensure the following documents accompany new applications:

- = A cheque made payable to NRC Trading Ltd
- = An up-to-date C.V.

I declare that the information provided on this form is complete and true to the best of knowledge.

Signed (Applicant):	Date:
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FOR NRC OFFICE USE ONLY

Approved by:
Date:
Comments: