



<b>OFFICE USE ONLY</b>				CS No:			
Date rec'd:				Invoice No:			
Payment Ref: (BACS/CC/PO)				App Exp:			
TP No:		Ins No:		VN:		2 <sup>nd</sup> stage:	
Monitor Assigned:				CS complete:			

## NPORS Training Centre Application Form

**Training Centre Details** (Please photocopy this application form if you require more than one centre to be registered)

**Training Provider Name and Registration No:** (if known)

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Training Centre Address	Training Centre Contact details
Building Name / No:	Name
Address Line 1	Position
Address Line 2	Tele No:
Town	Mobile No:
Post Code	Email

**Does the Training Centre have any of the following:** (please tick as appropriate)

Welfare Facilities <input type="checkbox"/>	Health & Safety Policy <input type="checkbox"/>
Emergency & Evacuation Policies & Procedures <input type="checkbox"/>	Equal Opportunity Policy <input type="checkbox"/>
Classroom/Indoor Training Facilities <input type="checkbox"/>	Registered with Information Commissioner (ICO) <input type="checkbox"/>
Outdoor Training Facilities <input type="checkbox"/>	Site Risk Assessments <input type="checkbox"/>
Appointed Fire Marshal <input type="checkbox"/>	COSHH Register <input type="checkbox"/>
Visitor Signing-in Procedure <input type="checkbox"/>	Safety Signage & Symbols <input type="checkbox"/>
HASWA Poster <input type="checkbox"/>	Appointed First Aider <input type="checkbox"/>

**What category of courses can the Training Centre provide?** (Please tick as appropriate)

Construction Plant <input type="checkbox"/>	Industrial <input type="checkbox"/>	Classroom <input type="checkbox"/>	Confined Spaces <input type="checkbox"/>
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### DECLARATION

I agree to allow an NPORS Auditor / Monitor to complete a Training Centre Accreditation Audit, to assess the centre for Accredited Training Centre status

Centre Contact Signature: \_\_\_\_\_

Date:

For fees and bank details please see Training Provider and Instructor Registration Fees (NP041a)

Please return completed form by email to [instructoradmin@npors.com](mailto:instructoradmin@npors.com) or by post to NPORS Ltd, PO Box 204, Northwich, Cheshire, CW9 7FY