

Bosch Security Academy Registration Form



BOSCH

Invented for life

1. Training Regulations

Regulations

In order to enable organization of courses in a timely and efficient way, the following regulations apply:

- Course reservations are accepted only by mail, E-mail or fax.
- An authorized person must undersign application forms.
- Application forms should be sent in at least 2 weeks prior to the course start.
- Bosch Security Systems has the right to cancel a course in the case of insufficient enrolments.
- The receipt of an application form will be confirmed as soon as possible.
Each participant will receive a final confirmation not later than one week before the start of the course, specifying place and time.
- Enrolment to a course can be cancelled by a participant up to 10 working days before the start of the course. Later cancellations are charged with the full course fee.
If no cancellation is indicated and a participant does not show up, the full amount of the course will be charged.
- It is always allowed to send a substitute participant to the course; no further charges will be made in that case.



2. Booking procedure

The Commercial and Technical Training booking procedures are defined as follows.

a. Procedure

Participants should always officially enroll themselves. Inquiries about the course can be addressed to the person mentioned below.

An application form for enrolment in the required course can be found below.

Enrolment address: Bosch Security Systems
Attn. Security Academy
Private Bag X118, Midrand 1685
South Africa
Tel: +27 11 651 7810
Fax: +27 11 651 7811
Email: ST.Training@za.bosch.com

b. Evaluation

Each course is ended by a formal evaluation of the content and the learning aspects. Participants can also add their personal comments to a course.

c. Certificate

All technical courses incorporate a test for participants, and upon successful completion of a course, a Bosch Security Systems-Certificate is awarded.



3. Training Application Form

Bosch Security Systems Application Form

to be faxed to: +27 11 651 7811

e-mail: ST.Training@za.bosch.com

Surname:		First Name:	
Date of Birth:	Company:		
Department:		Department No.:	
Address:			
Tel no.:	Fax no.:	E-mail:	
Courses Required			
Name of the course. Special interest :			
Bosch courses already completed.			
Short description of relevant experience.			
The undersigned herewith requests the above applicant to be enrolled on the mentioned course(s) and agrees with the terms stated in the Booking Procedure and Regulations.			
Name:		Date:	