

# Course Nomination Form

**PART A: to be completed by member.**

General  
Federation  
of Trade  
Unions



Educational Trust

**ALL SECTIONS MUST BE COMPLETED.  
PLEASE USE BLOCK CAPITALS.**

**COURSE TITLE:**

**COURSE DATES:**

**COURSE REF:**

**Forename:**

**Union:**

**Surname:**

**Section (if any):**

**Address:**

**Male/Female:**

**Employer/Company:**

**Post Code:**

**Unions Position(s):**

**Tel. No. (home):**

**Time in Union Post(s):**

**Tel. No. (work):**

**Special Needs (see below #):**

**e-mail :**

**Why do you want to attend this particular course? Continue overleaf if necessary.**

**PART B: to be completed by union office.**

**Signed:**

**Position:**

**PRINT NAME:**

**Union:**

**Date:**

NB. Part B must be signed by the union's General Secretary or a senior official notified to the GFTU as having responsibility for making nominations.

**# Special needs – eg vegetarian, large print, tape, Braille, disabled access, etc. For child care please phone our Education Officer (020 7388 0852) to discuss options.**

After both parts have been completed please return to the General Secretary, GFTU Educational Trust, Central House, Upper Woburn Place, London WC1H 0HY or fax to 020 7383 0820.

e-mail: [gftuhq@gftu.org.uk](mailto:gftuhq@gftu.org.uk)

web-site: [www.gftu.org.uk](http://www.gftu.org.uk)