

DRAFT NTFW APPLICATION FOR MEMBERSHIP FORM

Name of Organisation:

Address of Organisation:

Name of First Contact

Name of Second Contact

tel.
(m)
e mail
fax

tel
(m)
e mail
fax

No of locations in Wales

Is the organisation part of a larger Group?

Co Turnover

£0 to £100,000 () £100,000 to £500,000 () £500,000 to £1,000,000 ()
£1,000,000 plus ()

No of staff

Government funded programmes delivered e.g. Job Centre Plus, Dells Programmes etc

Other training/development programmes delivered. e.g. bespoke Management and Supervisory training

Other services offered e.g. Consultancy and Research

No of qualified instructors employed (i.e. NVQ Assessors and Verifiers, PGCE, Cert FE etc)

- a) Full-time
- b) Part-time
- c) Associate/freelance

If the organisation is represented on any relevant or 'stakeholder' organisations eg SSC'S, CCET's , Regional Advisory Groups. Please detail accordingly.

Signature
