CAMHS Emotional Health Awareness Foundation Training Form (To be completed by the delegate only).

Personal details				
Name:				
Work Address:				
E-mail:				Post code:
Work Contact:			Mobile:	
Additional needs:				
Gender:	Male			
	Female			
Course Fee £20.00				
Please complete Cost Centre OR Invoice Address				
Cost Centre:				
Invoice Address:				
Job Title:				
Have any members of your team already attended this training? Please give details if known.				
Please reserve a place for me on:				
Course Name	Trainer		Venue	Date
Emotional Health	Liz Meachen			
Awareness	Louise \	Vilkes	S	
Foundation				
Training				
			I	
Signed:				
Date:				

Please return this form to: camhs@norfolk.gov.uk CAMHS Children's Services, CAMHS, Room 117, County Hall, Martineau Lane, Norwich NR1 2DH or fax to 01603 222119. We will email confirmation of attendance and location map before the course.

About this course:

This course has been designed at a foundation level, so it will support you to develop a primary understanding of mental health.

By attending you are committing to:

• Cascade the knowledge gained within your setting within three months after attending the course.

Beneficiary information

Information from this form will be held in accordance with the Data Protection Act 1998. Norfolk County Council will hold this information for monitoring and course follow up purposes only. All information given will be treated in the strictest confidence.

Cancellation:

A course will only run with a minimum number. In the event that a course is under-subscribed applicants will be notified and where possible offered an alternative date/venue. No refund will be given for non-attendance; however, we are happy to accept a suitable delegate in your place. Any changes of delegate must be sent to camhs@norfolk.gov.uk (or as above), prior to the course date.