

Course Booking Form and Candidate Details

Course joining instructions and Training Policies are all available on Fenton TM website
<https://www.fentontm.com>

Course Name & Reference		Date		
Candidate Name		Date of Birth		
Address		NI Number		
		Passport Number		
		Driving Licence		
Employer				
Work Experience / Qualifications				
Do you have work experience in Temporary Traffic Management ?			Yes	No
What streetworks qualifications do you have ?				
LANTRA number				
NRSWA number				

Candidates – Additional Requirements & Medical Needs

Any change in your requirement or medical needs during this Assessment or instruction must be reported to your Assessor or Instructor. This information is required to protect your Health and Safety and all details will be treated in strict confidence

	Yes	No
Do you have difficulty in understanding English?		
Do you have difficulty in hearing?		
Do you have difficulty in reading?		
Do you have difficulty writing?		
Do you have mobility issues ?		
Do you have any medical issues we need to be aware of? <ul style="list-style-type: none"> • Are you a diabetic? • Do you suffer from epilepsy or fits? • Have you ever had blackout, or any other condition, which could cause sudden collapse or incapacity? • Are you taking medication? 		
Signed	Date	