Request for Involvement – Training

Name of School: Date:

Contact Person: Role :

Telephone Number: Email address:

Please indicate what length of training you are requesting:

Whole day Half Day or Twilight (up to 3 hours)

Staff Meeting (2 hours max) Series of Staff Meetings

**What area of DSEN or Safeguarding Training are you requesting?**

Please do not hesitate to ring Sue on 07854110297 or Tracey on 07913179125 if you

would like find out more details or discuss your training needs.

Please  *send completed request by e mail*  to: senservicessw@gmail.com

Many thanks for your request. We will contact you within 3 working days of receiving your request to make

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arrangements.