



'PARTNERS in CHANGE'

SKILLS FOR SUPPORT WORKERS

Expression of Interest Form

Please complete the form and post, email or fax to:

Sallyann Turner at Nationwide Training Solutions

Email: picinfo@nationwidesolutions.com.au

Fax: 03 5033 0562
Post: PO Box 1746
Swan Hill VIC 3585

Location of training: _____

Dates of Training sessions attending: _____

Where did you find out about the course? Please tick: Friends Web Paper Ads
 Workplace/Organisation Other _____

This training has been designed to provide support skills to people that have not necessarily worked in Disability or Mental Health services previously.

Have / do you work in the disability / mental health services? YES / NO

If so, when? _____ Organisation: _____

NAME: _____

ADDRESS: _____ P/CODE: _____

PHONE: () _____ MOBILE: _____

FAX: _____ EMAIL: _____

Dietary requirements: _____ Access requirements: _____