



A division of LTC GROUP87 Ltd

Confirmation of Prerequisites for CISRS Scaffolding Inspection course

Full Company Name:	
Coordinators Name:	
Contact Number:	
E-Mail:	
Order Number:	
Booking Number: (Can be found on booking confirmation email)	

Please select a prerequisite number that each candidate meets from the course description attached to your booking confirmation and enter the number in the Pre-req Met box. You can find the list of prerequisites on page 2 of the course description. They are numerically listed ↓

Candidate Name	N.I Number	Date of Birth	Pre-req Met
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Declaration

By signing and returning this form I confirm that I have read the relevant course description and I am aware of the prerequisites that apply to this course. I am also agreeing that should the candidates not meet the stated prerequisites listed in the course description that he/she may be refused entry to the course and you will forfeit the course fee.

Signature:		Signature:	
Print Name:		Print Name:	