

THE ROYAL BRITISH LEGION

MEMBERSHIP TRAINING

NATIONAL TRAINING PROGRAMME 2007

Course	Dates	Location	Remarks
Branch Management	23 – 25 February 22 - 24 June 7 - 9 December	South Leeds South	
Branch Treasurers' Course	9 – 11 February 8 - 10 June 23 - 25 November	Leeds South Leeds	
County Management	13 – 15 April 7 - 9 September	Leeds South	
County Conference Committee	9 – 11 March 20 - 22 July	South Leeds	
County Recruiting Officer	March September	Coventry Basingstoke	
Recruiting Refresher	February February February March March	South West North East Midlands South East	
Recruiting Adviser	X15 Regional Venues		RPRO Arrangements
County Instructors'	21 - 23 September	South	
County Youth Advisers'	October (TBN)	Leicester (NSPCC)	
Independent Examiners'	23 - 24 March 12 - 13 October	Leeds South	
Qualified Panel Members'	11 - 13 May 6 - 8 July	Leeds South	
Parade Marshals'	16 - 18 March	TBA	
Standard Bearer Judges'	22 - 24 June	TBA	
Band Workshop	TBA	TBA	
Standard Bearer Judges' Upgrade	21 – 23 September	TBA	

NATIONAL TRAINING COURSE TIMINGS

Course	Student Totals	Start	End
Branch Management	30 – 40	Friday 1800 hrs	Sunday 1230 hrs
Branch Treasurers	20	Friday 1800 hrs	Sunday 1230 hrs
County Management	24	Friday 1800 hrs	Sunday 1230 hrs
Conference Committee	30	Friday 1800 hrs	Sunday 1230 hrs
County Recruiting Officers'	14 – 20	Friday 1800 hrs	Sunday 1630 hrs
Recruiting Advisors' Course	As Required	Saturday 1000 hrs	Saturday 1600 hrs
Recruiting Refresher Course	20	Saturday 0930 hrs	Saturday 1630 hrs
County Instructor	12	Friday 1200 hrs	Sunday 1230 hrs
County Youth Officers	15	Friday 1800 hrs	Sunday 1230 hrs
County Training Officers Seminar	25	Friday 1800 hrs	Saturday 1530 hrs
Independent Examiners	20	Friday 1830 hrs	Saturday 1600 hrs
Qualified Panel Members	14	Friday 1800 hrs	Sunday 1230 hrs
Parade Marshals	24	Friday 1800 hrs	Sunday 1230 hrs
Standard Bearer Judges	15	Friday 1800 hrs	Sunday 1230 hrs
Band Workshop Seminar	50	Friday 1800 hrs	Sunday 1230 hours



**THE ROYAL BRITISH LEGION
NATIONAL TRAINING COURSES
STUDENT'S APPLICATION FORM**



(PLEASE COMPLETE IN BLOCK CAPITALS THROUGHOUT)

Full Name (CAPITALS): Mr / Mrs / Miss _____

Known Name: _____

Decorations / Awards: _____

Address: _____

Postcode: _____ Tel No: (H): _____

(W): _____ (Mob): _____

E Mail: _____

Age Bracket (Please Tick): Under 25 24 - 45 45 - 65 Over 65

Special Requirements: SMOKING NON-SMOKING

Disabled (State Degree of Mobility): _____

Special Diet: _____

Other Requirements: _____

Course Applied For:

Course Title: _____

Course Dates: _____

Venue: _____

Legion Details:

Branch: _____ Branch No: _____

County: _____ Membership No: _____

Legion Appointments:

Presently Held: _____

Previously Held: _____

Other Legion Courses Attended: (Give dates where possible)

County / Regional Level: _____

National Level: _____

BRIEF Details of Legion or other experience relevant to the Course:

BRIEF self "pen-picture" to support application:

COMMITMENT TO ATTEND: I agree that, should I cancel within 5 days of the course commencement date, that I expect to be asked to pay the full course fee.

Date: _____ Signature: _____

N.B. Completed application form MUST be endorsed by the County Training Officer before it is forwarded to the Membership Training Department (MTD) at the following address:

The MTD, HQ TRBL, 48 Pall Mall, London SW1Y 5JY

ENDORSEMENT BY THE COUNTY TRAINING OFFICER:

This application is / is not supported by the County for the following reasons:

Date: _____ Signed on Behalf of County By: _____

Printed Name: _____

Appointment: _____

Data Protection Act 1998
The RBL is required under the Data Protection Act, that all information provided by applicants to attend Membership Training Courses, is used solely for administrative purposes and held thereafter in the Membership Training Department archives and database.



THE ROYAL BRITISH LEGION
MEMBERSHIP SERVICES AND DEVELOPMENT
APPLICATION FOR RECRUITING TRAINING COURSE



NB: Attendance on recruiting training courses is confined to those selected by their County and supported by the RPRO. This application will therefore not be processed unless it bears the signatures of a principal County Officer (e.g. Chairman or Secretary) or the CTO (but not a member of the County recruiting team) and also the RPRO.

PLEASE COMPLETE IN BLOCK CAPITALS THROUGHOUT

Full Name Mr/Mrs/Miss:

Name known by:

Address:

Postcode Tel: (home) (work)

Age Bracket (Please Tick): Under 25 24 - 45 45 - 65 Over 65

Special Requirements: Smoking/Non Smoking

Disabled (State degree of mobility):
 (e.g. whether you use sticks, wheelchair or unable to climb stairs etc.)

Special diet or other special requirements:

Course applied for:

Title:

Dates: Venue:

Legion details: Membership No. County:

Branch: Branch No.

Legion offices: Presently held:

Previously held:

Other Legion training courses attended: (give dates where possible)

National level:
.....

County/Regional level:
.....

Brief details of Legion or other experience relevant to recruiting:
.....
.....
.....

Brief details of relevant skills:
.....
.....
.....

Applicant's signature: **Date:**

Completed form must be sent to County in the first instance

Endorsement by County

This applicant is endorsed by: _____ County

Signed on behalf of County: Date:
(NB box at top of page 1)

Name and Office:

After endorsement by County the form is to be forwarded to the appropriate RPRO.

I agree:

RPRO Signature:

Name: Date:

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