



SOLOMON ISLANDS SENIOR EXECUTIVE WOMEN IN BUSINESS TRAINING

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REGISTRATION FORM

The Senior Executive Women's Program curriculum was developed with the support of PSDI. PSDI is a regional technical assistance program undertaken in partnership with the Asian Development Bank, the Government of Australia, and the Government of New Zealand.

| Participant Information | | |
|---|---|--|
| | | |
| Last Name | First Name | Email Address |
| Mailing Address | Birth Date | Age |
| | Gender | Job Position |
| Employer | Occupation | Job Title |
| Employer Ph no | Mobile No. | Work Phone |
| Employer Address | | |
| Employer Email | | |
| Participants Line Manager/Supervis | sor Information | |
| | | |
| Last Name | First Name | |
| Email Address | Work Phone | |
| Mobile No | | *Not Applicable: I am Self-employed/Self-funded |
| Registration Fees/Payment Details/F | REFUND POLICY | |
| Training fee per person: | | /N |
| ISIA, SIWIBA & SICCI Member – SBD \$6,8 [please tick relevant rate] | General / | / Non-member – SBD\$ 7,500 |
| Your registration fee includes admission | bmission of your (completed) registration on to the SI Senior Executive Women in F essibility needs or special dietary requirer | Business Training Program |
| | nd nil thereafter. Refunds will be issued | intants Solomon Islands. A refund will be issued to <u>written requests</u> and d within two weeks of the receipt. Important to note: SBD1500 ers. |
| How did you hear about the training? (Ple | ease tick the relevant boxes) | Eligibility Criteria |
| Online search engine (e.g., Google) Social media (e.g., Facebook, LinkedIN Email Word of mouth Referral from a colleague or friend Other (please specify) | 1) | Mid to Senior Level Manager: Applicants must hold a mid to senior level managerial position within their organization with a minimum of 10 years work experience Availability: Applicants must commit to attending all four days of the course. |
| | | Employer endorsement: Registration must be endorsed by supervisor |

Evaluation and Monitoring

As part of our commitment to ensuring the effectiveness of the training program, participants will be required to complete a survey at the beginning and end of the training. The purpose of these surveys is to assess the participants' knowledge, skills, and satisfaction with the course content and delivery. The information gathered from these surveys will be used to improve future iterations of the training and measure the impact of the program. Additionally, approximately six months after the completion of the course, participants and their employers may be invited to participate in follow-up interviews. These interviews aim to gather feedback on the application of the acquired knowledge and skills in the workplace.

[] I agree to participate in the surveys and follow-up interviews. [please tick to indicate your willingness to participate]

| Employer Endorsement (For employed registrants only. Please do not fill in this section if you are self-employed) | | | |
|---|--|-----------------------------------|--|
| I | of | hereby provide my endorsement and | |
| consent for | as her employer to participate in the Senior Executive Women in Business Training. | | |
| | | | |
| | | | |
| Signature | | | |
| Signature | | | |

PLEASE ENSURE TO COMPLETE ALL FIELDS OF THE APPLICATION FORM AND SUBMIT TO THE ABOVE EMAIL ADDRESSES