**Application form**

! Please select the training that you would like to attend (one or both) !

**Project management for consulting**

**Business diagnostics for consulting**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Independent consultant | | Employed | Owner/partner of a consulting company |
| Name of the company |  | | |
| Position |  | | |

**Education**

|  |  |
| --- | --- |
| Years | Institution/degree |
|  |  |
|  |  |

**Business experience (other than consulting)**

|  |  |
| --- | --- |
| Years | Area |
|  |  |
|  |  |
|  |  |
|  |  |

**Industry/business sector experience**

|  |  |
| --- | --- |
| Industry/business sector | Comments |
|  |  |
|  |  |
|  |  |
|  |  |

**Consultancy experience**

|  |  |
| --- | --- |
| Years | Focus |
|  |  |
|  |  |
|  |  |
|  |  |

**Functional experience**

|  |  |  |
| --- | --- | --- |
| Finance  Marketing  IT  Operations | Quality management  Strategy  Sales  Branding | Organisation  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Professional qualifications**

|  |
| --- |
|  |

**Three main problems (challenges) you face and the skills you would like to acquire or improve**

|  |
| --- |
|  |

**Expectations of the course**

|  |
| --- |
|  |

**Please attach your CV and your company profile**

|  |  |
| --- | --- |
| CV attached | company profile attached |