**Enrolment form: Artificial Intelligence Practitioner**

Please email your completed form to: mlcsu.aip@nhs.net

|  |
| --- |
| **Key contact details** |
| Name: |
| Organisation: |
| Job title: |
| Email: |
| Telephone: |
| **Booking details for 10 examinable modules and 8 specialisms** |
| **Purchase Order Number (or cost centre if MLCSU):**  *Please also be aware that providing your PO number or cost centre is confirmation that funding is available to pay for the requested places. The Purchase Order number* ***MUST*** *be provided in advance of MLCSU booking the AIP Bundle (AIP course and APMG proctored exam.) Invoicing will be following booking. The fee is not refundable. Note if MLCSU is a new supplier to your organisation you may be asked for company details when you seek to raise a Purchase Order Number. Please contact the team at* **mlcsu.aip@nhs.net** *if further details are required.* |
| **Agreement funds are in place to cover the cost of training**  (Cost per delegate - NHS £849.50 & non-NHS £849.50+VAT)  Enter **YES** below:  Confirmation of funding provided above, and, in your covering, email is necessary before allocation of places and date of course can be confirmed. Please ensure you have the necessary authorisation. |

**Names and contact details of all delegates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Email** | **Mobile** | **Job Title** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

Candidates are advised that their name and email address will need to be shared with Cyber Skills Ltd to facilitate delivery of the course.