

**London Transport Regional Council**

**Application to Attend RMT Education Course**

Please complete the following in full

Name....................................................................

Address.................................................................

..............................................................................

.........................................Postcode......................

Telephone Number...............................................

E-mail address......................................................

RMT Membership Number....................................

Employer/Location................................................

Positions held within the union (if any).....................................................................................................................................................

Course title............................................................

Start date of course...............................................

Any special requirements......................................

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You should apply for paid release from your employer to attend this course. However, if you are unable to secure paid release, RMT will cover loss of earnings for course delegates. RMT will also cover reasonable food and travel expenses. An expenses form will be provided on the first day of your course. These costs are paid by the national union and not by your branch or the London Transport Regional Council.

Have you secured release to attend this course? **Y/N**

Would you like RMT to contact your employer about release? **Y/N**

Signature of delegate.....................................

Date.............................................

Completed forms should be e-mailed to Lorna Tooley at training@rmtlondoncalling.org.uk or posted to

Lorna Tooley

68 Upney Lane

Barking

Essex

IG11 9LR

If you have any questions or concerns, please feel free to contact Lorna at the above email address or by telephone on 07949290973