

**KOLEJ IACT SDN BHD**

(Formerly known as Institute Advertising Communication Training Sdn Bhd)

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IN - HOUSE TRAINING REQUEST FORM

Name of Company:

Company Address:

Date of Request:

Contact Person:

Position Held:

Telephone:

Facsimile:

Email:

Nature of Business:

Title of Workshop/Talk/Training:

Area of Interest:

Target Audience:

No. of Pax (estimated):

Age Group:

Duration:

Venue to be Held:

Preferred Language:

Other Requirements:

PSMB Claim (Y/N):

If Yes, Please Indicate Scheme:

FOR OFFICE USE ONLY

Suggested Facilitator:

Proposed Cost:

Remarks:

The Education Institute of:



Accredited by:

