IBITGQ Approved Training Organisation Form v1.0

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| **COMPANY CONTACT INFORMATION** |
| **Company legal name:**Click or tap here to enter text.**Company trading name:**Click or tap here to enter text. | **Company registered address:**Click or tap here to enter text. | **Company trading address:**Click or tap here to enter text. |
| **Company registration number:**Click or tap here to enter text.**Country of registration**Click or tap here to enter text. | **Company telephone number/s:**Click or tap here to enter text. | **Company website URL:**Click or tap here to enter text. |
| **PRIMARY CONTACT INFORMATION** |
| **Principle contact:****Forename:** Click or tap here to enter text.**Surname:** Click or tap here to enter text. | **Position or job function:**Click or tap here to enter text. | **Direct telephone:**Click or tap here to enter text.**Email address:**Click or tap here to enter text. |
| **OPERATIONAL INFORMATION** |
| **What type of services or products does your organisation deliver (select all that apply)?**[ ]  Training[ ]  Consultancy[ ]  Other (please state) Delivery of services |
| **Is your company a Governance, Risk, Compliance (GRC) or information security specialist? If yes, do you have experience in helping your clients become compliant to any of the following standards?**[ ]  ISO 27001[ ]  ISO 27005[ ]  ISO 22301[ ]  ISO 20000[ ]  PCI DSS[ ]  Privacy or Data Protection[ ]  Other (please state) Click or tap here to enter text.  |
| **How many years has your company been delivering training services?** Choose an item. |
| **How many years has your company been delivering consultancy services?** Choose an item. |
| **In which country or region do you operate?**Click or tap here to enter text. | **Please list any courses you currently deliver.** | **Do you offer classroom, online or distance learning?**Click or tap here to enter text. |
| **ACCREDITATIONS** |
| **Have you been accredited by, or are you an official agent, reseller or partner of any of the following organisations?****If yes, please select:** | [ ]  APMG[ ]  BCS (ISEB)[ ]  EXIN[ ]  ISACA[ ]  ISC2 | [ ]  PECB[ ]  RABQSA[ ]  GIAC[ ]  SANS[ ]  IRCA | [ ]  EC-Council[ ]  CompTIA[ ]  Microsoft[ ]  Other (please state)Click or tap here to enter text. |
| **DELIVERY INFORMATION** |
| **Which IBITGQ courses are you interested in delivering?**Click or tap here to enter text. | **How many IBITGQ training courses would you expect to deliver in the next 12 months?**Click or tap here to enter text.**How many delegates would you expect to attend each IBITGQ training course?**Click or tap here to enter text. |
| **How many proposed trainers does your organisation intend to use to deliver IBITGQ qualifications?**Click or tap here to enter text. **Do your trainers hold the qualifications they wish to deliver?**Click or tap here to enter text. | **Where do you plan to deliver the IBITGQ training courses?**[ ]  Your office / training location(s)[ ]  Your clients’ office location(s)[ ]  A hired training or conference room / centre[ ]  Other (please state) Click or tap here to enter text. |
| **Is there any additional information which you feel might be important to us at this stage?**Click or tap here to enter text. |
| **THANK YOU** for completing this form. Please send the completed form to servicecentre@ibitgq.org |

The quickest way to contact IBITGQ is through the service centre email servicecentre@ibitgq.org

**Address:**

**The International Board for IT Governance Qualifications (IBITGQ Corp.)**

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