# Macintosh HD:Users:nigelanastasi:Desktop:dots-01.pngAnnex 7: Requested Support

# **Knowledge Transfer**





* 1. **Name Of Training Programme**

* 1. **Summary of Training to be provided. Provide information on how the training is aligned to operations of the applicant.**

* 1. **Justify the economic feasibly of the training being proposed.**

* 1. **Training will be delivered by:**

Choose an item.

* 1. **Number of persons to be trained**

* 1. **Total contact/training hours per person**

* 1. **Job titles of persons that will be receiving this training.**
1.
2.
3.
4.
5.
6.
7.
8.
9.
10. 1. **A)** Provide qualifications and experience details of the qualified external provider or in house tutor delivering the training.

**1.7 B)** Explain how thequalification and experience of any external service providers is relevant to this training

**1.8 Provide a brief on the expected outcome of this training.**

**1.9 Training Start Date**

Click here to enter a date.

**1.10 Training End Date**

Click here to enter a date.

**1.11 Training Location**

**1.12 How relevant will the training be to trainees in other industrial sectors?**

**1.13 How will the successful completion of this training improve the operations of the undertaking in Malta?**