# OKANAGAN TRAINING & DEVELOPMENT COUNCIL (OTDC)

# TRAINING COURSE RESEARCH

*It is recommended you complete the Training Course Research from 1 – 2 Institutions*
*(if offered in different schools) BEFORE making any commitment to one*

| TRAINING COURSE RESEARCH #1 | |
|---|---|
| Institute Name: | Location: |
| Name of Training Program: | |
| Accredited? ☐Yes ☐No | Course Length: |

Estimated Cost of the training program:

Tuition/Fees: _____   Books: _____   Supplies: _____   Other (specify): _____

How often is the program offered?

☐Continuous Intake   ☐Monthly   ☐Yearly   ☐Other (specify): 

When is the first available start/end date for this program?  _____ Start  _____ End

When is the second available start/end date for this program?  _____ Start  _____ End

What are the pre-requisites for this program?

Do you have all the required pre-requisites?  ☐Yes  ☐No

If No, please list what pre-requisites are outstanding:

How many people graduated from this program last year?

How many of these graduates found employment in their chosen career?

Do employers recognize the training offered by this training institute? ☐Yes ☐No

Is this Training Institute and course registered with Private Career Training Institute Agency of BC (PCTIA)?

☐Yes ☐No        If No, then who?

Did you do internet research or contact school in order to **attach** Course Outlines/Costs/Start Dates?

☐Yes ☐No        Why?

Other Information about the course (use back if necessary):

**TrainingResearchAPRIL2015**

Completed by: _____        Date: _____
 (print name)

# OKANAGAN TRAINING & DEVELOPMENT COUNCIL (OTDC)

# TRAINING COURSE RESEARCH

*It is recommended you complete the Training Course Research from 1 – 2 Institutions*
*(if offered in different schools) BEFORE making any commitment to one*

## TRAINING COURSE RESEARCH #2

| | |
|---|---|
| Institute Name: | Location: |

Name of Training Program:

| | |
|---|---|
| Accredited? ☐ Yes ☐ No | Course Length: |

Estimated Cost of the training program:

Tuition/Fees: _____ Books: _____ Supplies: _____ Other (specify): _____

How often is the program offered?

☐ Continuous Intake ☐ Monthly ☐ Yearly ☐ Other (specify): _____

When is the first available start/end date for this program? _____ Start _____ End

When is the second available start/end date for this program? _____ Start _____ End

What are the pre-requisites for this program?

Do you have all the required pre-requisites? ☐ Yes ☐ No

If No, please list what pre-requisites are outstanding:

How many people graduated from this program last year?

How many of these graduates found employment in their chosen career?

Do employers recognize the training offered by this training institute? ☐ Yes ☐ No

Is this Training Institute and course registered with Private Career Training Institute Agency of BC (PCTIA)?

☐ Yes ☐ No      If No, then who?

Did you do internet research or contact school in order to **attach** Course Outlines/Costs/Start Dates?

☐ Yes ☐ No      Why?

Other Information about the course (use back if necessary):

**TrainingResearchAPRIL2015**

Completed by: _____      Date: _____
(print name)