TRAINING REQUIREMENTS FOR INCOMING SUBPOSTMASTERS									
Please complete fully and e-mail to Training Delivery Team. cc to Agency Recruitment.									
Office Name South Warnborough			FAD	Code	1	92904			
Full Address			Half	Half Day					
GRO			Clos	e At					
			26.935	unerati	on				
Postcode			Telir	10.	<u> </u>	GRO	<u>_</u>		
Details of incoming subpostmaster (SPMR)									
Full Name Mrs Josephine Hamilton			Tel Mobi	no. (hon le	1e)	GRO			
Full Address GRO			Pos	tcode		GRO			
To enable us to provide the correct level of training, please answer the following questions.									
1. OFFICE TYPE	!	Restricted hours		SPSO	X	MSPO			
	(	Combi format			Con	nmunity			
2. Does the Office require training?				YES		NO	$\boxtimes$		
3. Are they willing to undertake classroom training?				YES		NO			
4. Please indicate which NON STANDARD transactions are conducted at the office? Those with transactions indicated by * will be offered 10 days classroom training by TDT.									
*MOTOR VEHICLE LICENCES	Ш	ON LINE LOTTERY							
*PARCELFORCE GUARANTEED PARCELS		GVT (scratchcard to	erminals	)					
*UK PASSPORTS CHECKING SERVICE		ON DEMAND BURE	AU DE C	HANGE	Ξ				
*DVLA PREMIUM SERVICE		MONEYGRAM			S. 15				
ON DEMAND TRAVEL INSURANCE		FRANKING MACHIN	VES						
OTHER LOCAL SCHEMES - please specify:									
4. Is the office relocating and or rec	penii	ng?		YES		NO			
IF YES – please ask the Network Implementation and Equipment Team to contact the Training Delivery  Team to discuss a preferred transfer date. GRO									
or via email:- Training Delivery Team GRO  5. Has SPMR had any previous Post Office™ experience? YES NO									
5. Has SPMR had any previous Post Office™ experience?  If yes, please specify Leng					<u>لا</u> 				
6. How many assistants does the S	DMD	123	service						
-	Number   Number								
						·			

TRAINING REQUIREMENTS FOR INCOMING SUBPOSTMASTERS									
7. Have any of the assistants had previous experience?			YES	NO 🗌					
If yes, please specify. If no, how will they be trained/ supported?			Length of service and how recent?						
9. OPENING HOURS									
EXISTING HOURS									
	From	То	From	То					
MONDAY	09.00	13.00							
TUESDAY	09.00	13.00	4500						
WEDNESDAY	09.00	13.00							
THURSDAY	09.00	13.00							
FRIDAY	09.00	13.00							
SATURDAY	09.00	12.30							
NEW HOURS TO BE INTE (Excluding the training p	eriod, if possible.)		_	_					
	From	То	From	То					
MONDAY	09.00	13.00							
TUESDAY	09.00	13.00							
WEDNESDAY	09.00	13.00							
THURSDAY	09.00	13.00							
FRIDAY	09.00	13.00							
SATURDAY	09.00	12.30							
10. Are there any othe the training/ trainer? Eg w				at may be of benefit to					
11. Where should the Name Nigel A	Performance standa	rds, training action	n plan, and Sales	proforma be sent?					
Address	GRO								
Your name (Please print) Nigel A	Allen	Signature (Unless sent	by e-mail)	GRO					
Date of interview	eptember 2003	Date emailed to Training Delivery Team & Agency Recruitment							

Email to Training Delivery Team and cc. SG\_TS\_Agent\_Recruitment\_Support on lotus notes

Enquires GRO 4 Aug 2003