**RFI Response**

1. **Statement of Requirements (SoR) Compliance**

If you are responding as a potential training provider, please confirm whether you are compliant or willing to become compliant with the 9 requirements listed in the SoR provided. If you are responding as a potential recipient of the course, please skip to sections 2 & 3.

|  |  |  |
| --- | --- | --- |
| Requirement | Compliant | Willing to Become Compliant |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |
| 8 |  |  |
| 9 |  |  |

1. **Single Point of Contact (SPoC) Details**

Please provide the following information for future information regarding this opportunity to be directed to:

|  |  |
| --- | --- |
| Name: |  |
| Organisation: |  |
| Email Address: |  |

1. **Request for further information**

This project is still in the discovery phase. Please use the area below to provide any feedback regarding the delivery model proposed that you feel may improve the delivery of the CPS course:

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