|  |  |
| --- | --- |
| **StatCaB Code** | **[[YEAR]]-STATCAB-[[CODE]]** |
| **Beneficiary Institution** | Please write your institution’s name. |
| **Statistics Course Provider** | To be determined |
| **Statistics Course Theme** | Please write the statistics course theme. |
| **Statistics Course Venue** | Please write the city and country of beneficiary institution. |
| **Proposed Month** | Please give at least two alternative proposed months that are convenient for your organisation to have the statistics course. |
| **Proposed Start Date for the Statistics Course** | Please give at least two alternative start dates that are convenient for your organisation to have the statistics course. |
| **Duration** | *2 or 3 days* |
| **Background** |
| Please use this field to give a background on the reasons why your institution is in need of the statistics course theme stated above. You can use as much as space needed. |
| **Specific Objectives** |
| Please use this field to provide a clear, concise statement of the specific objectives of your institution for which the statistics course is expected to be instrumental in achieving them. You can use as much as space needed. |
| **Expected Statistics Course Coverage** |
| Please use this field to state what kind of topics your institution expects to be covered during the statistics course. A brief description of the profile of the trainer can also be mentioned here. You can use as much as space needed. |
| **Expected Statistics Course Outputs** |
| Please use this field to define the outputs expected from the statistics course. You can use as much as space needed. |

**Note: The yellow shaded text can be erased after the completion of required fields.**