

This form will help us assess your training needs and put together a tailored training package for current or future training needs. Please take a moment to complete the details below for **each person** requiring training and fax to our Training Consultants on (03) 9682 9022.

Company: _____

Name: _____

Position: _____

Time in Position: _____

Is this a newly created position or are you replacing an existing employee?

- New Position
- Replacing existing employee
- Neither

Please select all course areas that you feel fit the duties you perform in your role.

SUPPLY CHAIN

- Purchasing Processing
- Purchasing Non Stock & Setup
- Inventory Stock Movement
- Inventory Product Setup
- Inventory Pricing Methods & Setup
- Stocktake Processing
- Stocktake Using Scanners
- Importing Pack Stock
- Importing Non Pack Stock
- eCommerce trading with Suppliers
- Sawmilling
- Bill of Materials
- Job Costing
- Log Management

OTHER

- Archive History
- Crystal Reporting – Beginner to Intermediate
- Scheduler Processing
- System Administration Beginner
- System Administration Advanced

FINANCIALS

- Accounts Payable Processing
- Accts Payable Reporting & Balancing
- Accounts Receivable Processing
- General Ledger Processing
- General Ledger Integration Setup
- General Ledger Report Writing
- Cash Management Bank Reconciliation
- Payroll Processing
- Payroll Setup
- Asset Management Processing

SALES/DISTRIBUTION

- Order Entry – Sales Processing
- Order Entry – Invoicing
- Order Entry – Quote Processing
- Order Entry – Direct Sales
- Order Entry – FIS Sales
- Point of Sale Processing
- eCommerce trading with Customers
- Job Tracking
- Auction Tracking

Are there any other duties and responsibilities that your position covers?

Have you used to TIMMS before? Yes No

If Yes, Please complete the following section.

If No, Please skip to Training Preferences on page 3.

Please rate your competency in the following core TIMMS modules. I am

<u>CORE MODULES</u>	N/A	Not Confident In using	Proficient to do my job	Advanced
ACCOUNTS PAYABLE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ACCOUNTS RECEIVABLE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
GENERAL LEDGER	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
INVENTORY MANAGEMENT	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
PURCHASING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
STOCKTAKE	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SALES ORDER ENTRY	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
SALES REPORTING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please detail any other TIMMS modules that you have experience in

<hr/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<hr/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<hr/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<hr/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<hr/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please enter any additional information about your previous TIMMS experience:

TRAINING PREFERENCES

Please discuss the below options with your TIMMS administrator.

Preferred location of training: Onsite Disprax Office

Preferred time of day: Morning Afternoon All Day

Urgency of training: Urgent Not Urgent

Preferred contact person to arrange training: _____

Additional comments you may have to help us:
