

KNOWLEDGE BUREAU EDUCATIONAL CONSULTATION: INDIVIDUALS
Educational Needs Questionnaire
Date: _____

Personal Profile – All information will be kept confidential

Name:		
Designations:		
Company Name:		Type of Licenses:
Address:		
City:	Province:	Postal Code:
Email:		
Phone(primary):		Fax:
Cell:	Years in Business:	
Involved In: Financial Services Taxation and Accounting (circle one)		

Professional Profile

Employer	
Industry/Sector	
Position	
How Long?	
Advancement Opportunity?	
Internal Training Opportunity?	
Employer funding available?	

Educational Profile

High School/College	
University/Masters	
Licensing	
Industry Designations	
CE requirements/annual	
What's Missing?	

Career Development Needs and Recommendations

Career Needs	Educational Goals	Recommendations
Client Facing		
-Knowledge Gaps		
Advancement in Career		
-Diploma, Designation		
Self-Employment		
-Practice Management		
-Staff Training		

Please scan and email to registrar@knowledgebureau.com or

Fax to: 1-204-953-4762

Your educational consultant will contact you directly to discuss your educational goals.