



## Training Course Information Form

### Course Information

<b>Course Name:</b>	<b>Risk Management and Assessment</b>			
<b>Institute/Centre:</b>	Port Training Institute	<b>Course Code:</b>	M30	
<b>Type:</b>	<input checked="" type="checkbox"/> Program	<input type="checkbox"/> Course	<input type="checkbox"/> Workshop	
<b>Course Duration:</b>	<input checked="" type="checkbox"/> 5 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 1 Days	<input type="checkbox"/> Other
<b>Course Conducted:</b>	<input checked="" type="checkbox"/> Local	<input type="checkbox"/> International	Indicate: A.R.E	
<b>Course Venue:</b>	Anywhere			
<b>Course Language:</b>	<input type="checkbox"/> English	<input type="checkbox"/> Arabic	<input checked="" type="checkbox"/> Both	<input type="checkbox"/> Other

### Course Description

#### Course Outlines:

1. The risks and what moves to deal with.
2. Planning to deal with risk.
3. Review and evaluate plans.
4. Application areas and constraints.
5. Risk management in light of the continuity of work and on the institutional level.

#### Course Objectives:

- Train participants on how to control the risks faced by the company or institution and reduced to acceptable levels, as well as identified and measured, controlled and reduced to their lowest raised the point that was not avoided

<b>Course Includes:</b>	<input checked="" type="checkbox"/> Theoretical	<input type="checkbox"/> Fire Training Module	<input type="checkbox"/> Laboratory
	<input type="checkbox"/> Workshop	<input type="checkbox"/> Site Visit	

**Course Prerequisites:** None

**Who Should Attend:** All levels of managers who are involved in making and management decision-making company or organization

<b>No. of Participants/Course:</b>	<input checked="" type="checkbox"/> 5-10	<input type="checkbox"/> 10-15	<input type="checkbox"/> 15-20	<input type="checkbox"/> Other
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#### Qualifications of Participants:

- High Collage Certificates

<b>No. of Lecturer:</b>	<input checked="" type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 5
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<b>No. of Assistance:</b>	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3
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### *Course Facilities*

White Board     V. Projector     Data Show     PC     Manual  
 Books     Handouts     Flip Charts     S/W     Other

### *Course Evaluation*

Written Examination     Written Report(s)     Oral Presentation     Attendance  
 Delegates Participation

#### **Certificate Issue:**

Local Premises     AASTMT     International

### *Course Registration*

Admission and Registration

Department at the Port

#### **Registration:**

Training Institute

Online

Other

Beside Gate No. 27 - Outside

Customs Area, Alexandria Port

#### **Documents Required:**

Registration Form

ID/Passport Copy

Photo