



# Continuous Improvement Request

Person with request: ..... Date:.....

Person/s supporting request: .....

.....

**Issue/Area continuous improvement relates to:**

*(Specify aspects of the business improvement relates to. If a competency, specify the unit)*

**Details of issue:**

*(What is the identified problem/opportunity)?*



## Continuous Improvement Request

### Improvement suggestion:

<b>Request referred to:</b> <input type="checkbox"/> CEO <input type="checkbox"/> Training Manager	Date:
<b>Priority:</b> <input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low	<b>Recorded</b> on Continuous Improvement Register    Date:

*This form is not required to retained once information is recorded in Continuous Improvement Register*