



ACT! 2011 (V13) | USER COURSE

ACT! 2011 (V13 | ADMINISTRATOR COURSE

COURSE DETAILS – USER COURSE

- INTRODUCTION TO SAGE ACT!
- CONTACT RECORDS
- NOTES, HISTORY AND DOCUMENTS
- GROUPS AND COMPANIES
- SCHEDULING ACTIVITIES
- OUTLOOK SYNCHRONISATION
- LETTERS AND MAIL MERGES
- DASHBOARDS
- OPPORTUNITIES
- SMART TASKS
- AN OVERVIEW OF SYNCHRONISATION
- APPENDIX
 - USING SAGE ACT! E-MAIL EDITOR
 - THE CONTACTS TOOLBAR

COURSE DETAILS – ADMINISTRATOR COURSE

- CREATING A NEW DATABASE AND DEFINING NEW USERS.
- CUSTOMISING DATABASE FIELDS
- CUSTOMISING LAYOUTS
- CUSTOMISING MENUS AND TOOLBARS
- IMPORTING AND EXPORTING DATA
- DUPLICATES AND GLOBAL CHANGES
- DATABASE MAINTENANCE
- SMART TASKS CUSTOMISATION
- THE WORKSHOP

Each Courses Duration: two DAYS (2)

DELIVERY METHOD: FACILITATED WORKSHOP

Entrance Requirements – Computer Literacy and MicroSoft Office.

For the Administrator Course the learner should have a working knowledge or previously attended the User Course

Target Learners - This course is designed for any person who use the ACT! Contact Management and CRM Software Package.

Assessments

Assessments do not form part of this course and learners who wish to complete the assessment will need to register and pay separately for assessments.

Benefits - These courses will give the learner a sound knowledge of how to utilise the ACT! software efficiently.



Please complete and return with proof of payment to: 086 579 4640

Delegate Name:	Company Name:				
ID Number:	Company VAT Number:				
Postal Address:	Postal Address:				
Tel:	Tel:				
Fax:	Fax:				
Cell:	Cell:				
E-mail :	E-mail :				
Course Name:					
Course Date:	How did you learn about LTC?				
Course Times: Courses are presented from 09h00 – 16h30 . These times include tea breaks and a lunch break. Meal Requirements: Allergies Should you have any dietary preferences i.e. vegetarian, halaal, kosher etc? Please state if applicable: _____ Direct Deposit Account Details: Lemay's Training Centre CC, Standard Bank, Clearwater Branch Code: 00 001 206 Account No: 402222768	<u>Credit Card Payments–THE CARD USED FOR PAYMENT NEEDS TO BE PRESENTED ON THE DAY THE COURSE STARTS FOR AUTHENTICATION PURPOSES.</u> Card Holder: _____ Card Number: _____ Expiry Date: _____ CCV Number: _____ Amount: _____ Signature: _____ Please Tick <table border="1"> <tr> <td>Straight:</td> <td>Budget : 3 Months</td> </tr> <tr> <td></td> <td>Budget : 6 Months</td> </tr> </table>	Straight:	Budget : 3 Months		Budget : 6 Months
Straight:	Budget : 3 Months				
	Budget : 6 Months				

- **TERMS & CONDITIONS :**
-
- Seats are allocated on a first-come-first-served basis and are secured on receipt of payment and booking forms only.
- Payment is required strictly a week before commencement date of the course. Proof of payment to be faxed to 011 – 672 7779
- **NO CANCELLATIONS WILL BE ACCEPTED, THE FULL COURSE FEE WILL BE CHARGED – although substitutions may be made as agreed with Lemay's Training Centre. Delegate must attend next scheduled course**
- Lemay's Training Centre CC reserves the right to cancel any course should there be an insufficient number of delegates booked for a course.
- Secure parking available
- Certificates issued by PASTEL on completion of an assessment (pass mark 75%)

I hereby agree to the above terms and conditions and that I meet the Entrance Requirements for the course that I am registering for.

Applicant's Signature: _____ **Date:** ____ / ____ /20____