

## Digital Solutions for Knowledge Management Training

Date	Time	Duration	Venue	CPD	Cost (Excl. VAT)PP
21st Jun, 2025	8:30 AM-11:30 AM	3 Hour(s)	Zoom, Zoom	1	1,500.00

### Course Overview

Explore how technology is transforming HR functions, making knowledge storage, automation, and AI-driven insights essential. This module focuses on evaluating HR technologies for effective KM application, using AI and analytics to enhance HR knowledge utilization, and developing automated KM systems for workplace efficiency.

### Course Objectives

By the end of this program, participants will be able to;

- Evaluate HR technologies for effective KM application.
- Use AI and analytics to enhance HR knowledge utilization.
- Develop automated KM systems for workplace efficiency.

### Target Groups

This training is suitable to a wide range of professionals but will greatly benefit;

- HR Professionals

### Video Link(s)

Module Title	Video Link
Digital Solutions for Knowledge Management	<a href="https://www.youtube.com/watch?v=Uz9R497X_Dk">https://www.youtube.com/watch?v=Uz9R497X_Dk</a>



**CHRP. Den PN Gathitu**

**Secretary General**

**Academy of Certified Human Resource Professionals**

To; **PROFORMA INVOICE** **DATE: 25:01:2026**

QTY	DESCRIPTION	NET (KES)	VAT (KES)	GROSS (KES)
1	Digital Solutions for Knowledge Management	1,500.00	240.00	1,740.00
<b>GROSS (KES):</b> One Thousand Seven Hundred Forty				<b>1,740.00</b>

#### PARTICIPANT(S) DETAILS

NO.	NAME	EMAIL ADDRESS	TELEPHONE

#### PAYMENT DETAILS

**M-PESA Pay Bill No:** 247247 | **Account No.:** 300245 | **Amount:** KES 1,740.00

BANK NAME	ACCOUNT NAME	ACCOUNT NUMBER
Equity Bank	Academy of Certified Human Resource Professionals Ltd	1 2 9 0 2 7 1 2 4 5 7 5 3

**Bank Branch:** Kenyatta Avenue | **Branch Code:** 129 | **Swift Code:** EQBLKENA

#### FUNDING CONFIRMATION / TAX DETAILS

I, the undersigned, confirm that funds are available for the above training.

Name of Organization: .....

Org. KRA PIN: ..... Org. Mobile No.: .....

Confirmed By: ..... Position: .....

Signature: ..... Date & Stamp: .....

#### NOTE THAT:

- Only those Delegates whose fees have been paid in full will be allowed to the event
- Send a scanned copy of the duly completed Nomination Form to [admin@achrp.org](mailto:admin@achrp.org)

The above training Cost does not include Transport & Accommodation