

HRBP Action Planning & Business Simulation Training

| Date | Time | Duration | Venue | CPD | Cost (Excl. VAT)PP |
|----------------|----------|-----------|--------------|-----|--------------------|
| 31st Oct, 2025 | -2:00 PM | 3 Hour(s) | Zoom, Online | 1 | 1,500.00 |

Course Overview

The final module consolidates learning through strategic planning and simulation. Participants engage in peer coaching, present HRBP action plans, and complete certification.

Course Objectives

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

- Develop actionable HRBP strategies.
- Practice peer coaching and feedback.
- Demonstrate HRBP competencies through simulation.

Target Groups

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

- HR Professionals seeking strategic elevation
- HR Business Partners (current or transitioning)
- HR Managers preparing for business-facing leadership
- Leadership teams collaborating with HR on transformation
- Senior and mid-level HR professionals

Video Link(s)

| Module Title | Video Link |
|--|---|
| HRBP Action Planning & Business Simulation | https://www.youtube.com/watch?v=oOZo3gUx_ac |



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 | HRBP Action Planning & Business Simulation | 1,500.00 | 240.00 | 1,740.00 |
| GROSS (KES): One Thousand Seven Hundred Forty | | | | 1,740.00 |

| PARTICIPANT(S) DETAILS | | | |
|------------------------|------|---------------|-----------|
| NO. | NAME | EMAIL ADDRESS | TELEPHONE |
| | | | |
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| 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: | |
|--|--|
| 1. Only those Delegates whose fees have been paid in full will be allowed to the event | |
| 2. Send a scanned copy of the duly completed Nomination Form to admin@achrp.org | |
| The above training Cost does not include Transport & Accommodation | |