

Making Training an enjoyable experience



This course provides candidates with the knowledge and skills necessary to design.

AutoCAD Basic Level

Code: ED21A26

Duration: 20 hours

Start Date: Wednesday, 10/02/2021

Audience Profile: Participants may come from various departments and are dealing or wish to create complex spreadsheets. Participants who seek for ways to utilize all the excel features in order to create "smart sheets" or analyze data will find this course very useful.

Prerequisites for Participation: Basic knowledge of Microsoft Excel. Additionally participants should have basic knowledge on the creation of formulae and functions

Training Language: English

Training Materials: Step by Step training materials in the Eng-

lish Language

Course Objectives: The participants will be able to use advanced features of Excel in order to:

- Filter and analyze data
- Analyze data with Pivot Tables
- Group and create subtotals
- Use popular Functions such as IF function, VLOOKUP, PMT etc
- Create nested functions for automation and analysis of calculations
- Track formulae and function errors
- Protect Workbooks, files, sheets and cells
- Use Analysis tools for financial analysis

Certification: This course prepares for the respective MOS and ECDL Exam



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AutoCAD Basic Level

Venue: Webinar

Dates and Times:

| Dates | Times |
|-----------------------|-------------|
| Wednesday, 10/02/2021 | 13:30-17:45 |
| Friday, 12/02/2021 | 13:30-17:45 |
| Monday, 15/02/2021 | 13:30-17:45 |
| Wednesday, 17/02/2021 | 13:30-17:45 |
| Friday, 19/02/2021 | 13:30-17:45 |

Participation Cost

The cost includes notes and certificate.

| | Total Cost | HRDA Subsidy | Net Cost | |
|--------------------|-------------------|-----------------|-------------|--|
| Participation Cost | €280 | €- | €280 | |
| For Unemployed | Please contact us | | | |

Making Training an enjoyable experience



AutoCAD Basic Level

1 Touring AutoCAD layout

Working environment , AutoCAD files, Ribbon, Function Bar , Display colours, Options palette , Osnap , Dymic Input , UCS icon

Model Space, Paper Space, Ortho, Customizing Function Bar Draw commands,

Use polar commands to Create a Rectangle 50x50, 3 point circle, 2 point circle

Hatch, Gradient

2 Modify Commands

create a rectangle 50x50
Use commands ,
Fillet , Chamfer , Mirror , Copy ,Move , Rotate

3 Create the plan view of an Armchair

Use command Insert Block to insert the chair Use command Explode to break the chair

Use command Polar Array to create multiple clones of chair around a circle

Use the Rectangular Array to create a conference rectangular table

Use the Path Array to create Theater arrangement of chairs

4 LAYERS

Create layers ,line types , lineweights, colours The use of Lamp , Sun , Locker in layers

5 Insert image as XRef

Command Align to correct the dimensions of the image Command Sacele Reference to correct the dimensions of the image

Create Axis for the plan view
Create Walls of the Plan view
Create Widows and Door openings on the walls

Create Windows
Create Doors

6 Create all 4 Views manually

Create Sections manually

7 Create Domestic Services

Create Blocks for Hot Water Supply
Create Blocks for Cold Water Supply
Create Blocks for Sanitary waste water
Create Blocks for Electrical installation Power & Lighting

8 Create the Hot Water piping system

Create the Cold Water piping system
Create the Sanitary waste water system
Create the Electrical Installation for Power & Lighting

9 DIMENSIONS – ANNOTATE

Create Dimension Style
Dimension the drawing, Add text for Rooms, Add Areas of the rooms

10 LAYOUTS

Create one layout for every Domestic Service
Set up the paper size for printing
Set up the Scale of printing
Switch on –off the layers for every service to be plot
Rename the Layout
Plot the Layout

Delivering training since 1996





Registration Form

Seminar Code: ED21A26— Title: AutoCAD Basic Level Start Date: 10/02/2021

| A. Organization's de | etails (if ap | pplicable) | | | | | |
|---|---------------|-------------------|---------------------|-----------------------|-----------------|---------------|----------|
| Company/Organization | n: | | | Size: | □Small | □Medium | □Large |
| Economic Activity: | | | | Telephone: | | Fax: | |
| Address: | | | | Postal Code: | | | |
| Person responsible for | the | | | Email: | | | <u> </u> |
| registration: | | | | Direct Telephone: | | | |
| B. Participant's deta | ails (1) | | | | | | |
| □Mr □Ms N | Name | | | Surname | | | |
| Title/ Job Position: | | | | Email: | | ı | |
| Job description: | | | | Telephone/Mobile: | | Fax: | |
| Reasons for participating in the seminar: | | | | | | | |
| Please fill this section if there are special requests for the lunch provided (only in the case that lunch is included) □Fasting □Vegetarian □Vegan | | | | | | | |
| ☐ They will participat | e to the sen | minar more than o | ne participants (In | this case please fill | in the second p | age as well) | |
| C Dauticination | Cook | | | | | | |
| C. Participation PARTICIPATION IN | | NAR IS PREPAID | (at least three | days before the sta | art of the sem | inar) | |
| Please invoice □The pa | | | • | Number (if applicabl | | , | |
| ☐ Participation Cost: | | | € 280 | | | | |
| Cheques must be issued to EDITC Ltd and payment can be made directly through deposit to the account of the company | | | | | | | |
| Account Name: EDITC LTD IBAN:CY19 0050 0115 0001 1501 0686 9601 Account Number: 115-01-068696-01 SWIFT/BIC:HEBACY2N | | | | | | | |
| D. Terms and co | nditions | for participat | tion on EDITC | seminars | | | |
| The company accepts registrations for participation in the seminars at least 5 working days prior to the start of the seminar. EDITC does not commit to accept any registrations received in less than 5 working days before the start of the training program. Written cancellations received 5 working days before the start of the training program are accepted and in the case where a payment has been made by the client, the full amount is reimbursed to the client. Cancellations that do not meet the above term are invoiced. The client may replace the participant (s) provided that they meet the criteria for participation on this program. The company has the right to cancel or postpone a training program up to one day before the start date of the program. All prepayments are returned to clients. | | | | | | | |
| All registrations are strictly prepaid except credit customers. EDITC will not allow the entry of participants in the class unless their financial obligations have been settled. EDITC will inform the client upon receipt of the application form. Written confirmation for the implementation of the training program will be sent within 3-5 days before the start date of the seminar. In exceptional cases written confirmation may be sent one day before the start of the program. Participants are encouraged to contact the company in case they did not receive the confirmation. Participants with less than 75% attendance cannot be subsidized by the HRDA and in this case the participants (or their company) will have to pay the amount of the subsidy (in addition to their own payment amount). In case of subsidized programs by the HRDA all the required forms of HRDA must be sent to EDITC before the start of the training program. EDITC will | | | | | | | |
| not allow the entry of participants in the class unless the HRDA forms have been submitted to EDITC. 8. Certificates of participation will be given to participants after the completion of the course provided that their financial obligations and obligations regarding HRDA forms are settled. Otherwise certificates will be mailed as soon as the above obligations are settled. | | | | | | | |
| □We agree with the above terms and conditions | | | | | | | |
| Signature: | | | Date: | | | | |
| Stamp (in case of company): | | | | | | | |





Registration Form

| B. Participant's Details (2) | | | | | | | |
|--|----------------------------------|-------|-------------------|--|------|---|--|
| □Mr □Ms | Name | | Surname | | | | |
| Title/ Job Position: | | | Email: | | | | |
| Job description: | Job description: | | Telephone/Mobile: | | Fax: | | |
| Reasons for participating on the seminar: | | | | | | | |
| Please fill this section if there are special requests for the lunch provided (only in the case that lunch is included) □Fasting □Vegetarian □Vegan | | | | | | | |
| B. Participant's De | etails (3) | | | | | | |
| □Mr □Ms | Name | | Surname | | | | |
| Title/ Job Position: | | | Email: | | | | |
| Job description: | | | Telephone/Mobile: | | Fax: | | |
| | Reasons for participating on the | | | | | | |
| Please fill this section if there are special requests for the lunch provided (only in the case that lunch is included) □Fasting □Vegetarian □Vegan | | | | | | | |
| B. Participant's De | stails (4) | | | | | | |
| □Mr □Ms | Name | | Surname | | | | |
| Title/ Job Position: | Traine | | Email: | | | | |
| Job description: | | | Telephone/Mobile: | | Fax: | | |
| Reasons for participating on the seminar: | | | | | | l | |
| Please fill this section if there are special requests for the lunch provided (only in the case that lunch is included) □Fasting □Vegetarian □Vegan | | | | | | | |
| | | | | | | | |
| B. Participant's De | etails (5) | | | | | | |
| □Mr □Ms | Name | | Surname | | | | |
| Title/ Job Position: | • | | Email: | | | | |
| Job description: | | | Telephone/Mobile: | | Fax: | | |
| Reasons for participating on the seminar: | | | | | | | |
| Please fill this section if there are special requests for the lunch provided (only in the case that lunch is included) | | | | | | | |
| □Fasting □Vegetar | ian □Vegan | | | | | | |
| | | | | | | | |
| □We agree with the above terms and conditions | | | | | | | |
| Signature: | | Date: | | | | | |
| Stamp (in case of company): | | | | | | | |