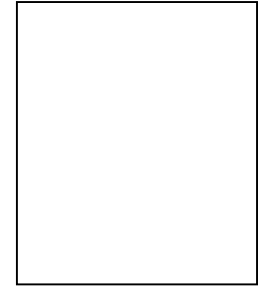
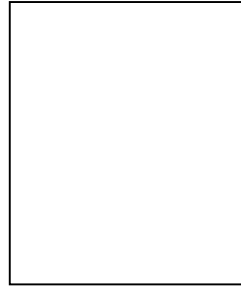




**OPEN TRAINING
COLLEGE**

www.opentrainingcollege.com



Affix 2 passport size photos above (signed on reverse)

**CPD REGISTRATION FORM
ACADEMIC PERIOD 2009/10**

Please complete this form in **BLOCK LETTERS** and return to:

Open Training College, Prospect Hall, Willowfield Park, Goatstown, Dublin 14.
Tel: 01-2988544, Fax: 01-2987004 email: info.otc@smh.ie Web: www.opentrainingcollege.com

Please ensure that all sections are fully completed and all necessary documentation attached.

Please note: Incomplete forms will not be processed and will be returned to the applicant.
Applications may be forwarded to the Admissions Committee at any time for further consideration

Section 1 - Course Details

Please tick all courses that you wish to register for in 2009/10

<u>Social Studies:</u>	<u>Start date:</u>	<u>Registration deadline:</u>
<input type="checkbox"/> Exploring Disability: A Sociological and Historical Perspective	21 September 2009	1 st September 2009
<input type="checkbox"/> Effective Communication and People Skills	2 nd November 2009	12 th October 2009
<input type="checkbox"/> Focus on the Individual: Person Centred Planning	21 st December 2009	30 th November 2009
<input type="checkbox"/> Professional Practice and Ethics	8 th March 2010	15 th February 2010
<input type="checkbox"/> Social Policy & Legislation	26 th April 2010	5 th April 2010

<u>Management:</u>	<u>Start date:</u>	<u>Registration deadline:</u>
<input type="checkbox"/> Professional Development and Communications	30 th November 2009	9 th November 2009
<input type="checkbox"/> Teamwork, Leadership and Motivation	18 th January 2010	28 th December 2009
<input type="checkbox"/> Introduction to Employment Law	1 st March 2010	8 th February 2010
<input type="checkbox"/> Managing Service Quality	24 th May 2010	3 rd May 2010

Section 2 - Personal Details

Surname: _____ First Names: _____
(Names as per passport/driving licence, to be used on all formal correspondence & certification)

Date of Birth: ___/___/___ PPS No. _____ Gender: Male Female
DD/ MM/ YYYY

Nationality: _____ Country of birth: _____

Address for correspondence:

Tel home: _____ Email: _____ Mobile: _____

Contact name and number in case of some emergency: _____

Do you have any specific learning requirements or medical conditions that the College should be aware of? If so, please give details below: _____

Section 3: Education

Secondary Education

Name of school: _____

Address of Institution: _____
(Including country)

Dates attended: From _____ To: _____ Last examination taken: Title _____

Overall Result: _____

Further/Higher Education

Name of Institution: _____

Address of Institution: _____
(Including country)

Course Title: _____

Dates attended: From: _____ To: _____ Last examination taken: Title: _____

Accrediting body: _____ Level on NQAI framework: _____

Overall Result: _____

**PLEASE PHOTOCOPY THIS PAGE FOR ANY OTHER COURSES YOU WISH TO PRESENT IN SUPPORT OF YOUR APPLICATION
ALSO PLEASE ATTACH COPIES OF TRANSCRIPTS/DIPLOMA SUPPLEMENT OF ALL QUALIFICATIONS LISTED**

Section 4 – Work/Employment Experience

Current/Most recent Employment

Dates: From: _____ To: _____ Title: _____

Responsibilities: _____

Employer name and address: _____

_____ Tel no: _____

Status of employment: Permanent Temporary Relief
 Full-time Part-time Voluntary

Previous Employment/Work Experience

Dates: From: _____ To: _____ Title: _____

Responsibilities: _____

Name and full address of employer: _____

Status of employment: Permanent Temporary Relief
 Full-time Part-time Voluntary

Section 5 – For Social Studies CPD applicants only

To be completed by applicant's current Manager:

Has this applicant completed the Garda Clearance process? Yes No

Will the organisation facilitate the applicant to complete work-based assignments? Yes No
(The identity of service-users and organisation will be protected and consent will be sought for each assignment)

Authorised Signatory on behalf of agency:

Print Name: _____

Signature: _____

Position held: _____

Contact number: _____

E-mail: _____

Place
Official
Organisation
Stamp
Here

Section 6 – International Applicants

UK applicants:

Minimum of GCSE in English required from recognised UK awarding body

The following requirements apply to **all Non-EU applicants** and **EU applicants whose first language is not English:**

Transcript of educational attainment achieved through studies in English at degree level (as validated by the NQAI Qualifications Recognition procedure see www.qualificationsrecognition.ie).

Or evidence of proficiency in English provided by one of the qualifications listed below
(please attach relevant evidence to this form).

Qualifications:	Minimum Requirement	Your Grade
TOEFL Paper-based test	550	_____
TOEFL Computer-based test	213	_____
IELTS	6.0	_____
Cambridge Certificate of Proficiency in English	Grade C	_____
Cambridge Certificate in Advanced English	Grade A	_____
NEAB test in English for speakers of other languages	Pass	_____
Warwick University English Language Test	Pass	_____

Section 6 – Other Information

How did you become aware of the course for which you are applying? Please **circle** as many as apply.

- | | | |
|----------------------------------|-------------------------|------------------------------|
| 1. Current/Past Student Referral | 4. Activelink eBulletin | 7. Online Education Fair |
| 2. Colleague | 5. Training/HR Manager | 8. Evening Classes Directory |
| 3. College Brochure/Flyer | 6. Web Search | 9. Other: |

DECLARATION

As the applicant I agree to the following (pending final offer of place):

- Complete this course to the best of my ability
- Work in collaboration with my line manager in undertaking my studies (Social Studies)
- Report any problems I encounter to the line manager in a timely fashion (Social Studies)
- Abide by any consent/confidentiality processes outlined by my employing agency (Social Studies)
- To adhere to College regulations pertaining to this programme of study.

I declare that all the information contained in this form is true and accurate and that any untrue or inaccurate information may void my registration with the College:

Signed: _____ Date: _____

The Open Training College fully respects your right to privacy, and will not collect any personal information about you without your clear permission. Any personal information which you volunteer to the Open Training College will be treated with the highest standards of security and confidentiality, strictly in accordance with the Data Protection Acts, 1988 and 2003. Any information which you provide in this way is not made available to any third parties, and is used by the Open Training College only in line with the purpose for which you provided it.

Occasionally we may contact you by post or email with details of further courses.

If you **do not** wish to receive this information please tick