

**Professional Development Courses**

**Certificate Level 5  
Tuesday course Primary**

**Application Form**

<i>For office use</i>	
Ref x 2	
CRB	
CV	
Photo	
Fees	
Date rec'd	

**Mr**  **Mrs**  **Miss**  **Ms**  **Other**

**First Names:** \_\_\_\_\_

**Surname:** \_\_\_\_\_

**Date Of Birth :** \_\_\_\_\_

**Home Address :** \_\_\_\_\_

(Including Post Code)  
\_\_\_\_\_

**Work Address :** \_\_\_\_\_

(Including Post Code)  
\_\_\_\_\_

**Telephone (Work)** \_\_\_\_\_

**Telephone (Home):**  **(Mobile):**

**Email**

**Qualified Teacher :**      **Yes**       **No**

**Teacher's Reference Number :**

**Other Qualifications :**

**Important: please enclose a C.V. giving details of your education, training & occupational experience.**

Please state briefly the background to your interest in specific learning difficulties, why you wish to take the course and what you would hope to gain from it. Use additional sheets of paper if needed but please attach securely.

How did you hear about the Helen Arkell Dyslexia Centre courses?

<b>I have already taken courses with HADC and am continuing with my studies:</b>	
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Do you wish to claim credit for previous courses taken? If so, please list below any training or courses completed at HADC or other centres:

Course	Centre Attended	Dates

- I will be paying my own fees in full.** **YES** (Please circle as appropriate)
- I will be paying my own fees in instalments.** **YES**
- I wish my School/College to be invoiced for the total course fees** **YES**

- The School is** State  Private  Grant Maintained

Please give details of who to contact with regard to your fees, including name and job title, as well as the address and telephone number of your school.

In order to ensure equal opportunities please give details of your ethnic origin by indicating the relevant number in the box below.

01=White, 02=Black Caribbean, 03=Black African, 04=Black or other black groups, 05=Indian, 06=Pakistani, 07=Bangladeshi, 08=Chinese, 09=None of those.

**Ethnic Origin No:**

SIGNED \_\_\_\_\_

DATED \_\_\_\_\_

# Certificate Level 5

## Application Form

**Please return this form to:**

**Courses Manager, The Helen Arkell Dyslexia Centre, Arkell Lane,  
Frensham, Farnham, Surrey, GU10 3BL**

Accompanied by:

- **a letter of support from your Headteacher** if you are applying for Certificate level and you are not a qualified teacher or if you are applying for a bursary. The letter should indicate the type of work and responsibility you are undertaking.
- **brief letters from two referees**, one professional, if appropriate and one character reference (your Headteacher's letter can be used.)
- **Police Check:** As a student on our courses we have to satisfy ourselves you have the appropriate police clearance. The Centre's policy requires a **full Enhanced Disclosure CRB check**, no more than 3 years old. If this can be provided by your school, a letter confirming the date and type of check will be sufficient although we prefer to take a copy of the original document. If not, you will need to apply for a CRB Disclosure through the Centre, which is available at a cost of £65.00 (payable to The Helen Arkell Dyslexia Centre) but you will receive a copy of your police disclosure statement which you may use for other purposes.
- A cheque for your **deposit** for the sum of **£350**. *This cheque will be banked on receipt.* (This deposit becomes non-refundable once you have been offered a place on a course.)
- Your **CV** giving details of your education, training & occupational experience
- A small passport size **photograph** of yourself

**All of the above are essential for your application to be processed and your place to be reserved.**

**Please do not send your form back before they are all complete.**

To contact the Courses Manager, please:

- ring: 01252 792400
- email: [courses@arkellcentre.org.uk](mailto:courses@arkellcentre.org.uk)
- fax: 01252 795669