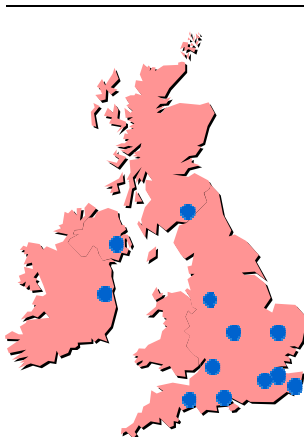


REGISTRATION FORM

PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS

(Please note: questions asking for details of: Gender, Date of birth, Ethnic origin, Disability, Learning support requirements and Honours/qualifications achieved are for monitoring purposes only)

Programme Locations, Lengths and Start Dates*



Location	Course start	18 days Weekdays	14 days in 2 day blocks/weekends	eLearning 3 days
Manchester	July 2010			
London Morley College	Sept 2010			
Glasgow	Sept 2010			
Birmingham	Sept 2010			
Slimbridge	Sept 2010			
Belfast	Oct 2010			
London Morley College	Oct 2010			
Exeter	Nov 2010			
Manchester	Nov 2010			
Dublin	Nov 2010			
Dover	Dec 2010			
Southampton	Dec 2010			
London Swiss Cottage	Dec 2010			
Distance/eLearning	Inductions at all locations listed above			

* All courses are subject to numbers recruited – no limits on distance learners

Please indicate above which programme you wish to reserve a place on

SECTION A Participant Details

Title			
Surname			
Forenames			
Employer/ organisation			
Position/ job title			
Gender (Please tick)	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Date of birth/...../.....
Nationality		Ethnic origin (Please see guidance note 1)	
Disability (Please see guidance note 2)		Learning support requirements (Please see guidance note 3)	
Honours/ qualifications achieved			

SECTION B Contact Details

HOME ADDRESS			
		Post code	
Telephone no		Mobile no	
Fax no		Email address	
Use this address for all correspondence? (Please tick)			<input type="checkbox"/> Yes <input type="checkbox"/> No

WORK ADDRESS			
		Post code	
Telephone no		Mobile no	
Fax no		Email address	
Use this address for all correspondence? (Please tick)			<input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION C (Programme Details)

Programme title (Please tick)	<input type="checkbox"/> (Level 5) Diploma in Management <input type="checkbox"/> (Level 5) Certificate in Management <input type="checkbox"/> (Level 5) Award in Management <input type="checkbox"/> (Level 4) NVQ in Management <input type="checkbox"/> (Level 3) Diploma in First Line Management <input type="checkbox"/> (Level 3) Certificate in First Line Management <input type="checkbox"/> (Level 3) Award in First Line Management <input type="checkbox"/> Effective Receptionists Programme <input type="checkbox"/> Post Graduate Certificate <input type="checkbox"/> Other (Please state in the space provided below)
Accrediting body (Please tick)	<input type="checkbox"/> ILM- Institute of Leadership and Management <input type="checkbox"/> City and Guilds/AMSPAR- Association Medical Secretaries, Practice Managers, Administrators and Receptionists (only applicable to certain programmes) <input type="checkbox"/> Kingston University- (for those wishing to complete the Kingston University top up only)

SECTION D (Terms & conditions and declaration)

Terms & Conditions

- 1.1 To reserve your place on the programme you are required to pay a non-refundable deposit of £300. Your place on the programme will not be secured until this deposit is received.
- 1.2 Payment of the overall cost of the programme (less the deposit) is required in advance of the programme's commencement. You will not be enrolled on the programme or registered with any of the accrediting bodies until this amount is received. Any attendance or assessment will not be eligible for accreditation.
- 1.3 The delivery of every individual Cherith Simmons Learning & Development programme is subject to financial viability. The decision to run a programme is made once an agreed minimum number of applicants are reached. Therefore, programme and accreditation fees are non refundable and are still payable if applicants fail to complete or withdraw from the programme prior to completion.
- 1.4 Cherith Simmons Learning & Development reserves the right to refuse the applicant access to the programme if terms 1.1 and 1.2 above are not satisfied.
- 1.5 Only by explicit (written) agreement with Cherith Simmons Learning & Development will any exception to these terms and conditions of payment be granted.

Declaration - This section **must** be completed by all applicants

I confirm that the information provided on this registration form is accurate and I give Cherith Simmons Learning & Development and the accrediting body (ies) my permission to store this information on their records. I also confirm that I understand and accept the Terms and Conditions set out on this form.

Signed (Participant) **Date**/...../.....

Guidance Note 1- Ethnic Origin

<i>Code</i>			<i>Code</i>	
1	<i>White</i>	5	<i>Pakistani</i>	
2	<i>Black- Caribbean</i>	6	<i>Bangladeshi</i>	
3	<i>Black- African</i>	7	<i>Chinese</i>	
4	<i>Black- Other black groups</i>	8	<i>Other</i>	

Guidance Note 2- Disability

<i>Code</i>		<i>Code</i>	
<i>P</i>	<i>Non- disabled</i>	<i>Q</i>	<i>Disabled (Please specify)</i>

Guidance Note 3- Learning support requirements

<i>Code</i>		<i>Code</i>	
<i>P</i>	<i>I have no additional learning resource requirements</i>	<i>Q</i>	<i>I will require additional learning support because I have a learning disability or other disability or because English is not my first language(ESL) (Please specify)</i>

Please Note: If you are disabled or require additional learning support please inform the tutor or contact your designated Client Services Manager at Cherith Simmons at the beginning of the programme to allow for reasonable provisions or support to be arranged.