

For Official Use Only Candidate Number



APPLICATION FORM

This form must be fully completed in BLOCK LETTERS. Any additional information must not exceed two A4 size pages. Please do not send a CV as it will not be considered as part of the application.

Do not forward any original certificates or references with this form.

Applicants will be shortlisted on the basis of information contained in their application form. It is therefore very important that all relevant information is included.

Creative Exchanges

Arts in the Community, FETAC Level 6 Component Award (6N3585)

Creative Exchanges will take place over 7 full days, 10:00 to 4:30 from May to June 2014. Participants must attend all sessions in order to complete the training.

2nd, 9th, 23rd, 30th May and the 6th, 20th, and 27th June.

Applicants should have:

An interest in arts and creativity

Willingness and an interest in doing creative activities with older people

Availability and commitment to attend 7 full days training and a significant amount of self directed study and project work.

A learner seeking entry to a programme leading to a level 6 award does not need a previous formal qualification. Learners may have achieved certification at level 5 (e.g. a FETAC level 5 certificate, component certificate or a significant range of subjects within the leaving certificate) or equivalent life/work experience.

In order to complete the course it will be necessary to carry out a project with a group of older people in a day care or residential setting

Personal Details				
Surname:		First Name(s):		
Address (for Communications)		Home Address (if different)		
Daytime Telephone		Mobile Phone Number		
E-mail Address		PPS Number:		
Please insert details of your highest education/training achievement (Selection of candidates will not be based solely on academic achievements)				
School/College:		Date (from mm/yy- to mm/yy):		
Address:				
Qualification:				
Awarding Body:				
Please list any other training/educational qualifications to date				
Year	Course Title	Qualification	Duration of course	Awarding body

Work Experience

Give particulars of all **relevant** work experience (voluntary or paid employment). Indicate responsibilities and significant features of each. If it is necessary continue on a separate sheet and attach it to the application.

Date from	Date to	Title and main responsibilities

Please explain why you want to come on this course. What skills do you hope to gain?

How do you feel that this training will impact on your work with older people?

Other information that you feel is relevant to this application

References

Give the names and addresses of two persons who can provide professional/character references

Name:	Name:
Address:	Address:
Occupation:	Occupation:
Phone:	Phone:
Email:	Email:

Declaration

Carefully read the declaration and the note to applicants below

I declare that the information I have provided in this application is complete and accurate. I agree that Age & Opportunity may make any enquiries it considers necessary to establish such matters as character and general suitability and to the release by other people or organisations (including any employer/former employer) of such information as may be necessary for that purpose. I understand that I may be required to participate in an evaluation of the course which may involve a follow up questionnaire and/or interview.

Signature of applicant:

Date:

Completed application forms must be
returned to: Liz Harper

Age & Opportunity
Marino Institute of
Education Griffith Avenue,
Dublin 9

Or by email- Liz.harper@ageandopportunity.ie

**Completed forms must be returned to Age & Opportunity no later than 5pm on
Tuesday 1st April 2014**

