

Course Application Form



**28 Woodland Terrace Lane, Plymouth, PL4 8QL.
 Telephone: +44 (0) 1752 258771**

Surname/Family name:	Forenames:	Title - (please circle)
		Mr Mrs Miss Ms

Course title applied for (please circle)	Start date	Expected end date
Certificate TESOL LTCL Diploma TESOL PTLLS level 3 PTLLS level 4 Certificate TESOL PTLLS 'Top Up' DTLLS		

Permanent address		Telephone No. Mobile No. Emergency contact:
Postcode		E-mail

Can you confirm that you will be over 18 at the start of the course?	Yes	No	We are sorry but we can't accept candidates who are under 18.	
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Nationality	
Country of origin	

Do you have a disability and/or a learning difficulty? Any declaration will be treated in strict confidence. The disclosed information is requested only in order that the provider can make reasonable provision to meet your specific requirements. Please circle **Yes or No** to each of the following:

Do you have a disability e.g. wheelchair user? **Yes** / **No**
Do you have a learning difficulty e.g. dyslexia? **Yes** / **No**
Any other disabilities? **Yes** / **No**
(If yes, please describe briefly):

Extra support needs **Yes** / **No**

Other – please describe

Qualification/Employment information

Working (days/hours)

Student (days/hours)

Not working Unpaid working

Please give details of your qualifications:

Year	Type of Exam/Awarding Body	Subject/Qualification	Grade

Work Experience:

Please provide full details beginning with the most recent employment

To	From	Employer	Job description	Reason for leaving

Languages spoken:	Level:
Languages written:	Level:

Where did you hear about us?

<input type="checkbox"/> Other students or trainees	<input type="checkbox"/> Community Organisation
<input type="checkbox"/> Job Centre	<input type="checkbox"/> Open Doors' website
<input type="checkbox"/> Trinity Website	<input type="checkbox"/> Other website (please state)
<input type="checkbox"/> Other (give details):	

Candidates applying for the Certificate TESOL course for whom English is a second or Foreign Language will need to demonstrate that they have the necessary level of language skills to be able to complete the course successfully. This may include a Cambridge Advanced Certificate or an IELTS score of 6.5. If you don't have either of these certificates we will be happy to do an in-house test so as to be sure you have the necessary skills.

For those applying for the LTCL Diploma TESOL please note that at interview you will need to provide evidence of a minimum of 960 hours teaching in the ESOL/ EFL sector within the last 5 years.

Candidates applying for the LTCL Diploma TESOL for whom English is a second or foreign language should demonstrate competence in all skills. The following are some of the tests and examinations that may be used as proof of competence:

- Trinity Graded Examinations in Spoken English: minimum Grade II
- Trinity Integrated Skills in English: Level III
- Cambridge ESOL: Certificate of Proficiency in English, Certificate in Advanced English
- IELTS: minimum band 8.0 in all sub-skills
- City and Guilds (Pitman): Advanced ESOL Examination
- TOEFL: score 650 or above.

I (the applicant) confirm that all the information is true and accurate. I know the information provided will be used for data processing, relevant to ODILS and subject to the Data Protection Act 1998.

Student signature

Date

Staff signature

Date

Staff name in capitals

Assessment Details (for Admin. Completion) :

Date assessed: ____/____/____

Availability:

am pm eve any

Literacy Numeracy ICT

Comments:

Tutor's signature _____

I (the student) confirm that the initial assessment and guidance received included guidance on:

- the implications of my choice of learning program
- the entry requirements of the programme of study
- assessment of my suitability for the programme
- any financial and personal support which might be applicable

The programme was agreed after consultation with the named member of staff. I agree that the guidance was appropriate to my needs and understand that further guidance is available on request.

I have read and understood the withdrawal and attendance policy subject to the provider's regulations. I know the information provided will be used for data processing, relevant to ODILS and subject to the Data Protection Act 1998.

Student signature

Date

Staff signature

Date

Staff name in capitals

