



# APPLICATION FORM

CIPD Programmes (All Levels)



Accelerate your Journey to Professional Recognition



**CIPD Programme** (Please indicate which programme you are enrolling on)

- Foundation Award
- Foundation Certificate in Learning & Development Practice
- Foundation Certificate in Human Resources Practice
- Foundation Diploma in Learning & Development Practice
- Foundation Diploma in Human Resources Practice
  
- Intermediate Award
- Intermediate Certificate in Human Resources Management
- Intermediate Certificate in Human Resources Development
- Intermediate Diploma in Human Resources Management
- Intermediate Diploma in Human Resources Development
  
- Advanced Award
- Advanced Certificate in Human Resources Management
- Advanced Certificate in Human Resources Development
- Advanced Diploma in Human Resources Management
- Advanced Diploma in Human Resources Development

**Personal Details**

*Please complete all requested information*

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

<b>First Name</b>		<b>Last name</b>	
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**Business Details**

<b>Job Title</b>	
<b>Company</b>	
<b>Address</b>	
<b>Town</b>	
<b>Post Code</b>	
<b>Tel No</b>	
<b>E-mail</b>	

**Home Details**

<b>Address</b>	
<b>Town</b>	
<b>Postcode</b>	
<b>Tel No</b>	
<b>Mobile No</b>	
<b>E-mail</b>	

**My preferred day time Tel. No. is:**    Home     Business     Mobile

**My preferred email address (this is required for use on e-portfolio) is:**  
Home     Business

## Invoicing Details

If the invoicing address will be different to those provided above please enter;

Contact Details	
Address	
Town	
Postcode	
Email	

Is a Purchase Order No required Yes  No

Order Number (if available)	
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## Agreement to Share Information

Busec acknowledges the provisions of the Data Protection Act and every care is taken to ensure that all information incorporated in the candidate's portfolio and any personal details of the candidate are treated with due confidentiality.

If Busec wishes to use any material from your portfolio, a separate permissions agreement will be sought.

I agree for my email address to be disseminated to candidates that I will meet at the Busec workshops:  
Yes  No

## Please provide the following documents to support your application

CV  Job Description

Please return this form to;  
**Busec Limited**  
**Suite 5 Spain Buildings, 28 The Spain**  
**Petersfield**  
**Hampshire GU32 3LA**  
Or [admin@busec.co.uk](mailto:admin@busec.co.uk)



## Equality & Diversity Information

All candidates are requested to complete the following and return the form to their Advisor. The information will be kept in strict confidence. It will be used towards the compilation of equal opportunity statistical data and in the case of special needs, to alert the Centre to any additional help required by the candidate.

### Ethnicity

How would you describe yourself?

Choose ONE section from A to E, and then tick the appropriate box

A  White

British

Irish

Scottish

English

Welsh

Other .....

B Mixed Heritage

White and Black Caribbean

White and Black African

White and Asian

Other .....

C Asian or Asian British

Indian

Pakistani

Bangladeshi

Other .....

D Black or Black British

Caribbean

African

Other .....

E Chinese or other ethnic group

Chinese

Other .....

F  Prefer not to say

### Learning Needs

Do you have any learning needs that may impact assessment?

Yes  No  Prefer not to say

If yes, is there any help Busec can offer which will assist you in completing your professional assessment programme? – please discuss with your adviser.

### Gender

Would you describe yourself as:

Male  Female?

Prefer not to say

### Age

What is your Date of Birth?

/  /

Prefer not to say