

Chiron Training Limited St Joseph's Hospice Mare Street, Hackney, E8 4SA Tel: +44(0) 208 257 7915 www.chirontraining.org

APPLICATION FORM FOUNDATION LEVEL COURSE IN FAMILY FOCUSED PRACTICE USING SYSTEMIC THEORY

Please fill out the form in full and return via email to admin@chirontraining.org with references. A £50 non-refundable deposit will also be payable, details of how to make payment will be sent on receipt of your application.

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Forename:	Surname:
Date of Birth:	
Date of Birth.	
Contact Number:	Mobile No:
	Tw
Home Address:	Work Address:
Home Email:	Work Email:
Home Email:	Work Email:
Current Job Title (if employed)	
1. FURTHER EDUCATION & PROFESSION	NAL QUALIFICATIONS
Please specify subject, place of study, year(s) of study and qualifications gained:	

2. RELEVANT WORK EXPERIENCE Please give details of relevant work experience, beginning with the most current: 3. PROFESSIONAL WORK EXPERIENCE Please describe your professional experience with families /couples/children/young people: 4. COURSE FEES 1). The fee for this course is £2500. Please note a £50 non refundable deposit must be submitted with your application. Details of how to make payment will be sent on receipt of your application. Additional costs are incurred if you opt to pay by installment. These costs have been included in payment options listed below. 2). Please also state whether you are a). funded by your employer OR b). Self Funding by completing the relevant section below. a) Employer Funded: An invoice will be sent b) Self Funded: There are three options for directly to you employer, please provide their payment, please indicate your preference: details: 1. Make one Payment of £2500 in full Contact name and email address:-Please type yes or no 2. Pay in three installments of £875. (Due at the Organisation name and Telephone Number:start of each term). Please type yes or no 3. Pay in 9 monthly installments of £295. (Due at Organisation Invoice Address (If different to that the start of each month). listed previously) Please type yes or no **NB** A detailed payment schedule will be sent to

you with your acceptance letter.

5. SUBMITTING YOUR APPLICATION

Complete the form and email to admin@chirontraining.org including your two references. When we have received your application we will send you payment instructions for the £50 non refundable deposit. Your application will not be processed until we have received payment.

A Reference Request Form can be found on the following page. Please provide to your referees for completion. You are required to provide two references with your application.



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Reference Request Form

Foundation Level Course in Family Focused Practice Using Systemic Theory

Applicants Name:
Referee Name:
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D. C. All
Referee Address:
Deferee Telephone.
Referee Telephone:
Referee Email Address:
neieree Linaii Address.
Relationship to Applicant:
Please comment on: the applicants abilities to: take on new ideas; express complex ideas
in writing; meeting deadlines. Please also comment on the applicants abilities to take part in
group activities and from relationships with peers, colleagues and clients. (Please continue
on separate sheet if necessary)