

**DIPLOMA COURSE**  
**Application Form**

I should like to be considered for enrolment on the Course and **enclose £450 fees deposit** .

I have received the current COMPREHENSIVE GUIDE TO TRAINING & REGISTRATION together with accompanying sheet headed CURRENT INFORMATION and document headed CODES OF PRACTICE AND CONDUCT.

I append herewith my Personal, Occupation and Education details, together with two written references from either employment or friends (references from family are unacceptable unless you are employed in a family business) . I also enclose the completed form headed CONFIDENTIAL DECLARATION. Please use block capitals for names, addresses and contact details.

**PERSONAL DETAILS**

**Full Name(s)** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_ **Post Code** \_\_\_\_\_

**Tel No(s ) Bus** \_\_\_\_\_ **Home** \_\_\_\_\_

**email** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_ **First Language** \_\_\_\_\_

**Ethnic Origin** \_\_\_\_\_

**Present Occupation** \_\_\_\_\_

**Previous Occupations (with dates)** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Details of any Voluntary Work**

\_\_\_\_\_

\_\_\_\_\_

**In which location do you wish to study**    **Birmingham (February start)**                      **CAMBRIDGE (September start)**  
**(Please circle your preference)**

**Cont'd over**

**Educational Details/Qualifications**  
(Please give details of Full and Part-time Education)

Dates                      SCHOOL/COLLEGE/UNIVERSITY                      QUALIFICATIONS ACHIEVED

---

---

---

---

**OTHER TRAINING QUALIFICATIONS OR RELEVANT EXPERIENCE**  
(dates and certificates mentioned, if any – please include evening classes/work study courses)

---

---

---

**REASONS FOR WISHING TO UNDERTAKE THE COURSE (continue on a separate sheet if necessary)**

---

---

Please give names and addresses of the 2 personal character referees WHICH YOU HAVE ENCLOSED. These may be contacted for corroboration.

1.      Name \_\_\_\_\_ Phone no. \_\_\_\_\_

        Address \_\_\_\_\_

---

---

2.      Name \_\_\_\_\_ Phone No \_\_\_\_\_

        Address \_\_\_\_\_

---

---

I declare that to the best of my knowledge, the above information and the information on the confidential declaration is correct, and understand that by signing this application form I have read, understood and accepted CCH's literature pertaining to the course(s), as detailed at the top of this application form. I have read, understand and will comply with the Terms and Conditions of CCH.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Cheques payable to CCH Ltd, post to CCH Ltd, 24 Milton Road, Impington, Cambridge, CB24 9NF