

**TRAINING TO WORK WITH CHILDREN WITH ADDITIONAL NEEDS
COURSE APPLICATION FORM 2011/2012**

Please complete this form **IN FULL** and return to Workforce Development Team, Box No CC1012, Castle Court, Castle Hill, Cambridge, CB3 0AP or fax to 01223 699703.

You can also download a booking form at www.cambridgeshire.gov.uk/childcare and email it to eyctraining@cambridgeshire.gov.uk.

These courses are aimed at supporting children with disabilities and their families to access childcare. Practitioners may apply for more than two courses by completing additional forms

Personal Details – Please use block capitals. Fields marked * are required.

*First Name		*Surname	
*Home Address			
		*Post Code	
*Home Tel		Work Tel	
Mobile Tel			

Gender <i>(please tick)</i>	Male <input type="checkbox"/>	Female <input type="checkbox"/>
Date of Birth		Ethnic Group
Do you have a disability or additional need?	Yes <input type="checkbox"/>	No <input type="checkbox"/> <i>(please tick)</i>
If yes please give details of support needed to access courses:		

Setting Details

*Setting Name			
*Setting Address			
*Post Code		*Setting Tel	
Setting Email Address			

Course Title			
1st choice date		2nd choice date	
1st choice venue		2nd choice venue	

Course Title			
1st choice date		2nd choice date	
1st choice venue		2nd choice venue	

Reasons for applying for the course(s)

Please fill in fully as places will be awarded to practitioners who demonstrate a clear need for the training should the course be over subscribed. This can be filled in by practitioner, EYFSA, CAPA, Area SENCO or CSDO if they are making the referral

Reasons may include: A need for the course because you have a child/children with a disability in your setting, you wish to be more proactive in supporting children with disabilities to access your setting, you are the setting SENCO, you wish to do the course for your own CPD.

Has your CAPA/EYFSA/Area SENCO or CSDO suggested that you attend the course? If so please supply their name	
Direct referral by EYFSA/CAPA/Area SENCO/CSDO	(To be completed by County Council/NCMA personnel ONLY)
Name of officer referring	

Booking Fee

The course fee for each course is £20 unless stated otherwise. Please note: We are unable to provide bursaries for staff cover or expenses for these courses.

I enclose a cheque for the sum of £

(please make cheques payable to Cambridgeshire County Council)

Please invoice to the setting address. If invoice should go to another address, please state here