

Title (e.g. Mr, Mrs, Miss): _____ First Name: _____ Surname: _____

Known As: _____ Date of Birth: _____ (You must be a minimum of 18 years old)

House Name / No: _____ Post Code: _____

Street: _____

Town: _____ County: _____

Tel No: _____ Mobile No: _____

Email address: _____

Occupation: _____

FOUNDATION COURSES

Bricklaying Start Date _____

Carpentry Start Date _____

Electrical Foundation

2 day Foundation Start Date _____

4 day Foundation Start Date _____

2 day I & T Foundation Start Date _____

Home Maintenance Start Date _____

Kitchen Fitting Start Date _____

Plastering Foundation Start Date _____

Backing Coats Rolled Ceiling

Floor Screeding Start Date _____

Plumbing Start Date _____

Roofing

Roof Construction Start Date _____

Roof Tiling Start Date _____

Fibreglass GRP Roofing Start Date _____

Green Roofing Start Date _____

Tiling

Foundation Start Date _____

Advanced Start Date _____

ELECTRICAL QUALIFICATION AND ADVANCED INSPECTION & TESTING COURSE

2 day Inspection & Testing Foundation and City & Guilds 2393 Building Regulations Exam Start Date _____

Domestic Installers (including City & Guilds 2393 Building Regulations Qualification) Start Date _____

City & Guilds 2393 Building Regulations Exam Only Start Date _____

City & Guilds PAT Testing (2377) 2377-32 2377-22 Combined 32 & 22 Start Date _____

City & Guilds 17th Edition (2382-15) Start Date _____

City & Guilds Electric Car Charging (2919) Start Date _____

City & Guilds Inspection and Testing

4 day 2392-10 (Fundamental & Initial I&T- Level 2) Start Date _____

5 day 2391-50 (Initial Verification I&T- Level 3) Start Date _____

5 day 2391-51 (Periodic I&T- Level 3) Start Date _____

5 day 2391-52 (Initial & Periodic I&T- Level 3) Start Date _____

5 day EAL 2625 (Initial & Periodic I&T- Level 3) Start Date _____

2391 Practical Assessment Date _____

2625 Practical Assessment Date _____

Additional Electrical Courses

2 day Advanced Inspection & Testing (3 Phase) Start Date _____

1 day (2391/2625) Pre Practical Assessment Course Start Date _____

Bespoke Course Course Title _____ Start Date _____

A booking confirmation will be sent out to you by email, unless otherwise indicated, once payment has been received. The centre will contact you if there is a problem with your application.

Data Protection Act 1988 – The information you provide on this form will be passed to The Builder Training Centre. The information you provide will be shared with other organisations for the purpose of administration, careers and other guidance and statistical and research purposes. Other organisations with which we will share information include City & Guilds and EAL. At no time will your personal information be passed to organisations for marketing or sales purposes. Further information about data confidentiality is available on request from the Centre.

Do you consider yourself to have any disability or difficulty that may affect your learning or attendance at the Centre?

No Yes **If yes, we will forward a Disability Report for completion at your earliest opportunity.**

Do you wish to make us aware of any other information that will help us provide appropriate assistance to facilitate your learning here? All information collected will be kept confidential and used on a need-to-know basis.

No Yes If Yes, please specify _____

MARKETING QUESTIONNAIRE

Have you studied at The Builder Training Centre before? Yes No

Where did you hear about our centre (please tick one)

- | | | |
|--|--|---|
| <input type="checkbox"/> Returning Student | <input type="checkbox"/> Poster / Leaflet | <input type="checkbox"/> Newspaper/Magazine – Please state which one: |
| <input type="checkbox"/> Tutor | <input type="checkbox"/> Quest | <input type="checkbox"/> Internet - Please state which website: |
| <input type="checkbox"/> Recommendation | Search Term Used: | |
| <input type="checkbox"/> Passer by | <input type="checkbox"/> Other – Please state: | |

IF YOU ARE ATTENDING AN ELECTRICAL COURSE PLEASE COMPLETE THE FOLLOWING.

Tick as many of the following you can complete unaided:

- | | | |
|--|--|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Earth bonding | <input type="checkbox"/> Identify different Earthing systems (TNS, TT, TNC-S) |
| <input type="checkbox"/> 13a Ring Circuit | <input type="checkbox"/> Continuity testing of CPC's | <input type="checkbox"/> Continuity testing Line and Neutral |
| <input type="checkbox"/> 2 way lighting | <input type="checkbox"/> Ring circuit continuity | <input type="checkbox"/> Insulation resistance |
| <input type="checkbox"/> Spur | <input type="checkbox"/> R1 + R2 calculations | <input type="checkbox"/> Earth fault loop impedance (Zs & Ze) |
| <input type="checkbox"/> 3 plate ceiling rose lighting circuit | <input type="checkbox"/> PFC (Prospective fault current) | |
| <input type="checkbox"/> Outside light | <input type="checkbox"/> RCD Tests | |

Please tick if you have previously obtained any of the following qualifications:

- C&G (2382) 17th Edition (Level 3)
- C&G (2393) Building Regulations (Level 3)
- C&G (2392) Fundamental Inspection & Testing (Level 2)
- C&G (2391/2394/2395) Inspection & Testing (Level 3)
- EAL (2625/4337/4338) Inspection & Testing (Level 3)
- Other; please specify _____

ETHNIC MONITORING DETAILS – I would describe my ethnic origin as:

- | | |
|--|--|
| <input type="checkbox"/> Asian or Asian British – Bangladeshi (1) | <input type="checkbox"/> Mixed - White & Asian (9) |
| <input type="checkbox"/> Asian or Asian British – Indian (2) | <input type="checkbox"/> Mixed - White & Black African (10) |
| <input type="checkbox"/> Asian or Asian British – Pakistani (3) | <input type="checkbox"/> Mixed - White & Black Caribbean (11) |
| <input type="checkbox"/> Asian or Asian British - any other Asian background (4) | <input type="checkbox"/> Mixed - other Mixed background (12) |
| <input type="checkbox"/> Black or Black British – African (5) | <input type="checkbox"/> White – British (13) |
| <input type="checkbox"/> Black or Black British – Caribbean (6) | <input type="checkbox"/> White – Irish (14) |
| <input type="checkbox"/> Black or Black British - any other Black background (7) | <input type="checkbox"/> White - other White background (15) |
| <input type="checkbox"/> Chinese (8) | <input type="checkbox"/> Prefer not to provide / Not provided (16) |
| | <input type="checkbox"/> Other (17) |

Payment must be made in order for us to hold a place on a course for you. This can be either a NON REFUNDABLE deposit, or full payment which includes a NON REFUNDABLE deposit. Please sign and date to confirm that you wish to enrol on the course indicated above and that you have read and will abide by The Builder Training Centre Terms and Conditions of booking, regulations and policies of the centre.

Signed..... Date.....