

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

<input type="checkbox"/> Bricklaying	Start Date _____
<input type="checkbox"/> Carpentry	Start Date _____
Electrical Foundation	
<input type="checkbox"/> 2 day Foundation	Start Date _____
<input type="checkbox"/> 4 day Foundation	Start Date _____
<input type="checkbox"/> 2 day I & T Foundation	Start Date _____
<input type="checkbox"/> Home Maintenance	Start Date _____
<input type="checkbox"/> Kitchen Fitting	Start Date _____
<input type="checkbox"/> Plastering Foundation	Start Date _____
<input type="checkbox"/> Backing Coats (Schedule 1)	<input type="checkbox"/> Rolled Ceiling (Schedule 2)
<input type="checkbox"/> Floor Screeding	Start Date _____
<input type="checkbox"/> Plumbing	Start Date _____
Roofing	
<input type="checkbox"/> Roof Construction	Start Date _____
<input type="checkbox"/> Roof Tiling	Start Date _____
<input type="checkbox"/> Fibreglass GRP Roofing	Start Date _____
Tiling	
<input type="checkbox"/> Foundation	Start Date _____
<input type="checkbox"/> Advanced	Start Date _____

ELECTRICAL QUALIFICATION AND ADVANCED INSPECTION & TESTING COURSE

<input type="checkbox"/> 2 day Inspection & Testing Foundation and City & Guilds 2393 Building Regulations Exam	Start Date _____
<input type="checkbox"/> Domestic Installers (including City & Guilds 2393 Building Regulations Qualification)	Start Date _____
<input type="checkbox"/> City & Guilds 2393 Building Regulations Exam Only	Start Date _____
<input type="checkbox"/> City & Guilds PAT Testing (2377)	2377-32 <input type="checkbox"/> 2377-22 <input type="checkbox"/> Combined 32 & 22 <input type="checkbox"/>
	Start Date _____
<input type="checkbox"/> City & Guilds 18 th Edition (2382-18)	Start Date _____
<input type="checkbox"/> City & Guilds Electric Car Charging (2919)	Start Date _____
City & Guilds Inspection and Testing	
<input type="checkbox"/> 4 day 2392-10 (Fundamental & Initial I&T- Level 2)	Start Date _____
<input type="checkbox"/> 5 day 2391-50 (Initial Verification I&T- Level 3)	Start Date _____
<input type="checkbox"/> 5 day 2391-51 (Periodic I&T- Level 3)	Start Date _____
<input type="checkbox"/> 5 day 2391-52 (Initial & Periodic I&T- Level 3)	Start Date _____
<input type="checkbox"/> 5 day EAL 2625 (Initial & Periodic I&T- Level 3)	Start Date _____
<input type="checkbox"/> 2391 Practical Assessment	Date _____
<input type="checkbox"/> 2625 Practical Assessment	Date _____
Additional Electrical Courses	
<input type="checkbox"/> 2 day Advanced Inspection & Testing (3 Phase)	Start Date _____
<input type="checkbox"/> 1 day (2391/2625) Pre Practical Assessment Course	Start Date _____
<input type="checkbox"/> Bespoke Course	Course Title _____
	Start Date _____

How did you hear about our centre? e.g. Internet, passer by, returning student: _____

A booking confirmation will be sent out to you by email, unless otherwise indicated, once payment has been received. This can be either a non-refundable deposit, or full payment which includes a non-refundable deposit.

You will be contacted if there is a problem with your application.

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

No Yes **If yes, what is your disability?** (Please select the most suitable description)

- Autism Attention Deficit/Hyperactivity Disorder Colour Blind Hearing Impaired Mental Illness
 Physical Disability Specific Learning Difficulties Speech Impaired Visceral Disability Visually Impaired
 Other Please specify: _____

Do you require any assistance whilst attending our centre? No Yes

If yes, to help us provide appropriate assistance to facilitate your learning we may forward a Disability Report for completion at your earliest opportunity and before your course is due to commence. All information collected will be kept confidential and used on a need-to-know basis.

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

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

- C&G (2382) Wiring Regs (level 3) 17th Edition 18th Edition 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) |

It is our intention to ensure that all students undertaking a course/s at The BTC do so successfully. There are therefore minimum entry requirements for our courses, particularly our City & Guilds and EAL electrical qualification courses, to ensure that students entering those programmes have studied and achieved an appropriate level of knowledge/qualifications in the subject areas necessary to undertake the programmes successfully.

Please tick to confirm that you have read and understand the pre-requisites listed on our website, www.thebtc.co.uk, for your chosen course/s.

YES

Please tick to confirm that you have read and understand The BTC 'Terms and Conditions of Booking' YES

Please tick to confirm that you have read and understand The BTC 'Privacy Policy' YES

We would like to send you emails to keep you up-to-date with details of other BTC courses, products and offers that we provide. Please confirm if you consent to us doing so YES NO

You can opt out at any time by emailing info@thebtc.co.uk using the title 'unsubscribe', or directly via any email from us or via our website.

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