



Foundation Programme in Sexual Health Promotion
Mullingar Application Form



Please complete application form in BLOCK CAPITALS with BLACK pen. Be as detailed as possible regarding your need for this training in relation to your work. Use additional pages as required

Name:

Job Title:

Name of Organisation / Community Group

Please list your current main client group i.e. youth, disability, children etc.?

Non-HSE Staff HSE Staff (please tick as appropriate)

If HSE Staff please indicate discipline

Work Address:

Contact Tel No: Mobile No.(essential)

E-mail address:

Alternative address for correspondence

Training Location: Mullingar Town Venue TBC Closing date for application: 25th May 2020

Dates (10 days in 2-day modules) Autumn 2019/Spring 2020 - All Tuesday's and Wednesday's

October 6th & 7th November 10th & 11th December 8th & 9th 2020

January 12th & 13th 2021 February 9th & 10th 2021

Are you a line Manager? Yes No If No, please ensure your line Manager completes the section below

Line Manager (Please print Name)

Job title E-mail address:

Work address: (if different from applicant's)

Contact No landline Mobile No:

Signature of Line Manager / Supervisor

(essential if approval necessary for training)

Please list the target group(s) with whom you intend to use the skills/information from this training

Young parents older people ethnic group men women children

Other (please specify)

Please outline in less than 200 words what prompted you to apply for this course and how you feel you may utilise the learning in your work setting. Please note your application will not be processed unless this is completed Please use and attach extra page provided with application form

Please give details any previous sexual health promotion experience (if any)? Please attach extra sheet if required

Do you have any special access requirements? Yes No

Please explain

Applicants signature Date