** APPLICATION FORM**

- Applying for: **Postgraduate training course in Paediatric Osteopathy**

at the **London Clinic for Paediatric Osteopathy**

- Personal details:

|  |  |
| --- | --- |
| Title |  |
| First name |  |
| Last name |  |
| Gender |  |
| Nationality |  |
| Home Address |  |
| Contact (phone) |  |
| Email address |  |

- Osteopathic employment:

|  |  |
| --- | --- |
| Present employer/practice principal |  |
| Start date |  |
| Address |  |
| Contact details |  |

|  |  |
| --- | --- |
| Additional employer/previous employment |  |
| Start date |  |
| Address |  |
|  |  |
| Contact details |  |

-Osteopathic training:

|  |  |  |  |
| --- | --- | --- | --- |
| Institution | Award (e.g. Most) | Class (e.g. 2:1) | Year |
|  |  |  |  |

-Relevant course/CPD courses (completed or planning to enrol)

|  |  |  |  |
| --- | --- | --- | --- |
| Nature of course | Institution | Date | Number of Hours |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

-Criminal convictions:

|  |
| --- |
| Do you have any convictions, cautions, reprimands or final warnings that are not "protected" as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) by SI 2013 1198? |
| ☐ Yes ☐ No  (If 'yes', please supply details on a separate sheet in a sealed envelope marked 'confidential' and send with this application. A criminal record will not necessarily be a bar to enrolment on the course). |
| Please note: If your application is successful you will be required to apply for an 'Enhanced Disclosure' with Lists from the Disclosure and Barring Service (DBS). Further information can be obtained from: <https://www.gov.uk/government/organisations/disclosure-and-barring-service> |

-Additional information:

|  |
| --- |
| Please outline your motivation for applying for the paediatric course; and briefly describe your osteopathic journey leading up to your decision to apply. |
|  |

- Declaration:

|  |
| --- |
| I confirm that all the information provided is correct, and agree to the London Clinic for Paediatric Osteopathy processing personal data contained in this form, or other data, which they may obtain from me or other people or organisations, for any purpose connected with my studies, or my health and safety whilst on the premises. |
| Signature: Date: |

-Next step:

Please email this completed form with your current Curriculum Vitae to:

[info@paediatricosteopathy.co.uk](mailto:info@paediatricosteopathy.co.uk)