



**HEALTH & SAFETY DEVELOPMENT
SCHOLARSHIP APPLICATION FORM**

Course places are limited to one for each organisation. Once given the place is not transferable to other individuals, other training providers or other dates. In signing the form the applicant and their organisation are committing themselves to the course of study. Also, the Scheme is not designed to meet a competence requirement essential to an applicant's primary job, e.g. a Health and Safety Advisor, Facilities Manager, etc.

This form must be completed in full and be submitted with the Organisation's most recent Annual Report. A Director, Trustee or person of similar status must countersign the form.

Send the completed form to The CSG NEBOSH Certificate Sponsorship Board at the address below. Attach additional sheets if necessary.

SECTION 1: APPLICANT AND ORGANISATION DETAILS

Individual Details			
Name:			
Address for correspondence:			
Contact Phone number:			
Post held:			
Is this voluntary or paid? (Delete which is not applicable)			
Is health and safety identified as one of the roles of your current post?			
Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you completed any health and safety courses?			
Charity Name and Number			
Charity's main activities			
Preferred location for course			
Signed by applicant :	Date:		

Authorisation	
Signed by Director/Trustee/Management Board Member:	Date:
Job Title/Post Designation of authorising officer	

SECTION 2: TRAINING OUTCOMES ASSESSMENT

The following questions provide information to allow the selection panel to reach their decision. This decision will be based upon how effective the training will be for the work of the Charity and the individual taking the Certificate Course.

Assessment questions for Organisation making the application

To what extent will the health, safety and welfare learning meet the objectives of the organisation?

How does the organisation manage health and safety now, what competent support does it get?

How does the organisation intend to apply the skills acquired from the training?

Assessment questions for person hoping to undertake the course of study

Please list the learning outcomes (knowledge, skills, awareness) that you hope to achieve by taking part in this learning activity:

What will be your continuing education needs after completing the Certificate Course? How do you, and your organisation, intend do meet these?

In what ways were equal opportunities promoted in selecting the individual who has been nominated?

COMPLETED FORMS TO BE RETURNED TO:

The CSG NEBOSH Certificate Scholarship, c/o the Health, Safety & Welfare Service, Action for Children, 85 Highbury Park, London N5 1UD.