

| | |
|---|--|
| <i>For office use</i> | |
| Ref x 2 | |
| DBS needs to be less than 3 yrs old from completion of course | |
| CV | |
| Photo | |
| Deposit | |
| Date rec'd | |

Professional Development Courses

Helen Arkell Level 5 Diploma In Teaching Learners with Dyslexia/Specific Learning Difficulties

Application Form

| | |
|---|---|
| Farnham | |
| Tuesdays KS1 & KS2 <input type="checkbox"/> | Wednesdays KS2 & KS3 <input type="checkbox"/> |

Mr Mrs Miss Ms Other

First Names: _____

Surname: _____

Date Of Birth: _____

Home Address: _____

Post Code: _____

Work Address: _____

Post Code: _____

Telephone (Work): _____

Telephone (Home): (Mobile):

Email:

Qualified Teacher: Yes No

Other Qualifications:

Please state briefly the background to your interest in specific learning difficulties, why you wish to take the course and what you would hope to gain from it. Use additional sheets of paper if needed but please attach securely.

How did you hear about the Helen Arkell courses?

Fees

| | | |
|---|--|--------|
| <input type="checkbox"/> I will be paying my own fees in full | | YES/NO |
| <input type="checkbox"/> I will be paying my own fees in 3 instalments following £500 deposit 3 instalments – £1600 1 st September 2025 £1600 1 st December 2025 £1490 1 st March 2026 | | YES/NO |
| <input type="checkbox"/> I will be paying my own fees in 10 monthly instalments following £500 deposit 10 instalments - £474.00 1 st of the month, from 1 September 2025 to 1 June 2026 Includes £50 supplement for paying in monthly instalments | | YES/NO |

(Please circle as appropriate)

| | |
|--|-----|
| <input type="checkbox"/> I wish my School/College to be invoiced for the total course fees | YES |
|--|-----|

Please give details of who to contact with regard to your fees, including name and job title, as well as the address and telephone number of your school.

| |
|--|
| |
|--|

SIGNED _____

DATED _____

Please tick below if you would like to sign up to receive regular news from Helen Arkell by email

(You can unsubscribe at any time and we will not bombard you with emails or share your details with third parties)

Level 5 Diploma

Application Form

Please return this form to:

Courses Manager, Helen Arkell Dyslexia Charity, 24 West Street, Farnham, Surrey,
GU9 7DR

Together with:

- Two references, one professional, and one character reference.
- **DBS - Police Check: As a student on our courses we have to satisfy ourselves you have the appropriate police clearance to enable you to go into schools to do your teaching practice. The schools require a full Enhanced DBS check which is no more than 3 years old. If you don't have this you will need to apply for a DBS Disclosure. The centre can apply for a DBS at a cost of £65.00, you will receive a certificate of your police disclosure statement which you may use for other purposes. Alternatively you can make arrangements for this yourself**
- Your **CV** giving details of your education, training & occupational experience
- A small passport size photograph of yourself
- **All of the above are essential for your application to be processed**
- A non-refundable deposit of £500 will be due on day of interview once you have been offered a place on the course
(This deposit is non-refundable)
- **Please do not send your form back without the above documents, unless you have been specifically requested to do so.**

To contact the Courses Manager, please:

Phone: 01252 792400

Email: julieh@helenarkell.org.uk

Helen Arkell Dyslexia Charity

24 West Street | Farnham | Surrey | GU9 7DR

t 01252 792 400 e enquiries@helenarkell.org.uk w www.helenarkell.org.uk

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