CANAL SKILLS Leadership Training Programme

## Application Form

Personal Details

Full Name:

Date of Birth:

Full address:

Postcode:

Telephone Number:

Email address:

Do you have a Driving License? (delete as appropriate)

*Yes No*

EDUCATION

Secondary School:

Courses and results:

From: Until:

Further Education (college, training or University if relevant)

Educational institution name:

Courses and results:

From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment

1. Organisation (most recent, if none, please enter N/A):

Role and duties:

From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Organisation (most recent, if none, please enter N/A):

Role and duties:

From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Organisation (most recent, if none, please enter N/A):

Role and duties:

From: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SKILLS AND AMBITIONS

Tell us about any hobbies or skills you have?

Tell us why you would like a place on this course?

Have you ever taken part of had training in any of the following? (Delete as appropriate)

Lock-keeping (taken part) Lock-keeping (had training)

Team leading/Customer service (taken part) Team leading/Customer service (had training)

Canal Boat piloting (Helmsman) (taken part) Canal Boat piloting (Helmsman) (had training)

Tour Guiding (taken part in) Tour Guiding (had training)

31.If other, please say what:

* A key part of this training course will be entering into a Social Contract involving agreeing to undertake volunteering hours with your new skills. Can you confirm you agree to this?

Yes

No

* Due to the nature of the volunteering and potential employment involved, all attendees will have a PVG check done with Disclosure Scotland. Do you agree to this? (Delete as appropriate)

Yes

No

* The training course will run from 2nd March for two weeks, full time, with an assessment day on 22nd February. Can you confirm your availability to take part in all aspects of the training? (Delete as appropriate)

Yes

No

* During the training, photographs may be taken and shared on social media channels and in publicity. Do you consent to this? (Delete as appropriate)

Yes

No

* Would you be willing to have your story shared as a case study with the funders of this course? (Delete as appropriate)

Yes

No

* Are you in good physical health to take part in this activity? If you need any support, please detail what: