

## Application Form

Please read the Guidelines for Applicants, which can be found at the back of the application form. When complete please email the application form to: [info@fertilebodymethod.com](mailto:info@fertilebodymethod.com)

1. Personal Details (Please complete in BLOCK CAPITALS where handwritten)		
<b>Title :</b>	<b>Gender</b> Male <input type="checkbox"/> Female <input type="checkbox"/>	
<b>Surname/Family Name :</b>	<b>Previous surname</b> (if applicable) :	
<b>First Name(s)/Given Name :</b>		
<b>Date of Birth :</b>		
<b>Addresses</b>	<b>Correspondence</b> (This address will be used for all correspondence)	<b>Home</b> (if different from correspondence address)
	<b>Postcode</b>	<b>Postcode</b>
<b>Email :</b>		
<b>Telephone numbers</b> (please include full country and area codes)		
<b>Mobile :</b>		<b>Other contact number :</b>
<b>Next of kin details</b>		
Name:		Relationship:
Address:		
Telephone:		

2. List the course(s) you wish to apply for
<b>Name of course</b>

3. Nationality and residence details	
<b>Country of birth :</b>	<b>Country of permanent residence :</b>
<b>Nationality :</b>	



## 6. Work history

Give details of your work experience, training and employment.

Job title	Name and address of employer	Full or part-time	Start date	End date

## 7. Personal statement

Please provide a personal statement that sets out your reasons for undertaking the course.

## 8. DECLARATION

I declare that the information on this form is correct to my best knowledge

I agree that Fertile Body Method / Amarisa Training Academy may record and process the information contained in this form and the Self-declaration form for statistical and administrative reasons in accordance with the Data Protection Act 1998.

**Applicant's signature :**

**Date :**

(if you are completing the application form electronically, please type your full name into the signature space)

## 9. Self-declaration form

### 9.1 Disability / Special Needs

Please enter tick the appropriate box if you have a disability, which may in some way affect your studies or may require special facilities or treatment.

- Two or more impairments and/or medical conditions
- A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D
- A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder
- A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- A mental health condition, such as depression, schizophrenia or anxiety disorder
- A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches

- Deaf or a serious hearing impairment
- Blind or a serious visual impairment uncorrected by glasses
- A disability, impairment or medical condition that is not listed above

### 9.2 Criminal Convictions

**Please read the Guidelines for Applicants before replying to this question.**

If you have a relevant conviction that is not spent please tick the box, otherwise leave it blank.

### 9.3 Ethnic Origin

Complete this section only if you have shown in section 3 of the form that your country of permanent residence is in the UK.

Please tick the appropriate ethnic origin terms below which you feel most closely describes your ethnic origin.

- |                                                               |                                                        |
|---------------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> White                                | <input type="checkbox"/> Other Asian background        |
| <input type="checkbox"/> Gypsy Traveller                      | <input type="checkbox"/> Mixed – White & Black African |
| <input type="checkbox"/> Black or Black British – Caribbean   | <input type="checkbox"/> Mixed – White & Asian         |
| <input type="checkbox"/> Black or Black British – African     | <input type="checkbox"/> Other Mixed background        |
| <input type="checkbox"/> Other Black background               | <input type="checkbox"/> Arab                          |
| <input type="checkbox"/> Asian or Asian British – Indian      | <input type="checkbox"/> Other Ethnic background       |
| <input type="checkbox"/> Asian or Asian British – Pakistani   | <input type="checkbox"/> Ethnicity not known           |
| <input type="checkbox"/> Asian or Asian British - Bangladeshi | <input type="checkbox"/> Prefer not to say             |
| <input type="checkbox"/> Chinese                              |                                                        |

## **Guidelines for Applicants**

Please note that Amarisa Training Academy may cancel the course if there are not sufficient students enrolled on the course. In such instances the course fee will be refunded.

### **1. Personal detail**

Previous surname- If you have changed your name by marriage or otherwise, state your previous surname or family name.

Correspondence address -This address and your email address will be used for all correspondence unless an alternative is provided.

Permanent home address- If different from Correspondence address.

### **2. Details of the courses you wish to apply for**

Please list your course choices

### **3. Nationality/Residence details**

Please complete this section.

### **4. English language**

If English is not your first language you will need to enter details of your English language qualification. transcript to the form.

### **5. Qualifications held**

List the qualifications you hold.

### **6. Work history**

Please include your work experience and training, paid or unpaid, full-time or part-time relevant to the course.

### **7. Personal statement**

### **8. Declaration**

Please ensure you sign the declaration.

### **9. Self-declaration form**

#### **9a. Disability, special needs or medical condition codes**

We aim to create an environment that enables all students to participate fully. To help us make any reasonable adjustments that may be necessary, please tick the relevant boxes.

### **9b. Declaration of a criminal conviction**

To help us reduce the risk of harm or injury to our students and staff caused by the criminal behaviour of other students, we must know about any relevant criminal convictions that an applicant has. Please read the following carefully.

**If you have a relevant criminal conviction that is not spent, you should tick the box, otherwise leave it blank.**

If you tick the box, you will not be automatically excluded from the application process.

#### **What does 'spent' mean?**

If a person does not re-offend during their rehabilitation period, their conviction becomes 'spent' (as defined by The Rehabilitation of Offenders Act 1974). Convictions that are spent are not considered to be relevant and you should not reveal them. You should note that certain offences are never spent.

You should be aware that certain professions or occupations such as (but not limited to) teaching, healthcare, law, accountancy, social work and courses involving work with children or vulnerable adults, including the elderly or sick people, are exempt from the Rehabilitation of Offenders Act 1974 and different rules apply with regard to the disclosure of information about criminal convictions.

More information on offences and rehabilitation periods can be found at

<https://www.gov.uk/government/publications/new-guidance-on-the-rehabilitation-of-offenders-act-1974>

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### **9c. Ethnicity**

Complete this section only if you have shown in section 3 of the form that your country of permanent residence is in the UK