Ollscoil Chathair Bhaile Átha Cliath Dublin City University



REGISTRY

APPLICATION FOR REGISTRATION ON PROFESSIONAL DEVELOPMENT MODULE

NS466 – PERSON CENTRED DEMENTIA CARE (LEVEL 8 – 10 CREDIT MODULE)

Name:		
Contact address:		
Next of Kin: Name & Contact Number:		
State place of work & Role :		
Highest Academic Qualification & Professional Qualification:		
Professional Registration Number if relevant:		
Are you working in contact with people with dementia at least once a week (tick Y/N):	Yes:	No:
Do you have IT skills: Word/ email, Social media, power point	Yes:	No:
Telephone numbers (Mobile or Work):		
Email address:		
Date of birth:		
Period of registration at DCU:	2017-2018	
Module for which you wish to register:	NS466: Person-Centered D	Dementia Care
If a current or past student of DCU, please supply your student ID Number and the degree for which you are/were registered:		
State if HSE employee (Yes/No)		

Signed: (Applicant)

PLEASE RETURN THIS FORM ALONG WITH A CURRICULUM VITAE, **ONE** PASSPORT PHOTOGRAPH AND IF YOU ARE A NURSE, PROOF OF NURSING REGISTRATION TO THE ADDRESS BELOW.

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Please complete the following information and <u>return with</u>	application form for NS466
Organisation:	
Nursing home	
Hospital general	
Hospital psychiatric	
Community care services	
Day service / day care	
Health centre / Primary care	
Other	
If other please specify:	
Address of organization:	
Setting within the organisation	
Care of elderly ward	
Acute care	
Residential care of elderly	
Day care	
Community care	
Dementia specific unit	
Mental Health	
Psychiatry of later life	
Other	
If other please specify:	
Sector	
Public	

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Private	
Voluntary	
Role	
ADON	
RGN	
CNM	
PHN	
CNS	
HCA	
OT	
RNID	
Social worker	
Mental health nurse	
Service manager	
Dementia care coordinator	
Other	
If other please specify:	
Level of education	
Certificate (level 5)	
Ordinary degree (level 7	
Diploma (level 7)	
Honours degree (level 8)	
Higher diploma (level 8)	
Masters (level 9)	
Postgrad diploma (level 9)	