APPLICATION FOR REGISTRATION ON PROFESSIONAL DEVELOPMENT MODULE
NS568 – PERSON- CENTRED APPROACHES TO DEMENTIA CARE 1 (LEVEL 9 – 10 CREDIT MODULE)

STATE PREFERRED CENTRE:

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:	2021-2022
Module for which you wish to register:	NS568: Person-Centred Approaches to Dementia Care 1
If a current or past student of DCU, please supply your student ID Number and the degree for which you are/were registered:	
Approval/Funding from Employer (Yes/No):	Yes: No:

SIGNED: **(APPLICANT)**

Please email this form along with your CV, a letter(s) showing leave and funding approval, **one** passport photograph (JPG/PNG format), **one** form of identification (see overleaf) and if you are a nurse, proof of nursing registration to the following email address**:** science@dcu.ie

A scanned copy of one of the following forms of identification should accompany your application for this module (please DO NOT send original documentation):

1. Current valid passport (from country of citizenship) **OR**

2. Irish Driving Licence or Learner Permit (new credit card format) **OR**

3. Birth Certificate with National Age Card issued by An Garda Siochána Photo ID **OR**

4. Garda National Immigration Bureau (GNIB) card **OR**

5. National Identity Card for EU / EEA / Swiss citizens **OR**

6. Irish Public Services Card

7. Form NVB1 Vetting Invitation – applies to programmes where Vetting is required

Please complete the following information and **return with application form for NS568:**

Organisation (tick box):

Nursing home

Hospital general

Hospital psychiatric

Community care services

Day service / day care

Health centre / Primary care

Other

If other please specify:

Address of organisation:

Setting within the organisation (tick box):

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 (Tick box):

Public

Private

Voluntary

Role (tick box):

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 (tick box):

Honours degree (level 8)

Higher diploma (level 8)

Masters (level 9)

Postgrad diploma (level 9)