



APPLICATION FOR FUNDED LEARNING PROVISION

Course applying for: (please tick)

	Day	Eve	Sat
City & Guilds Level 2 Diploma in Beauty Therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City & Guilds Level 2 Diploma in Nail Technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City & Guilds Level 2 Diploma Complementary Therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City & Guilds Level 3 Diploma in Beauty Therapy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City & Guilds Level 3 Certificate in Body Massage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
City & Guilds Level 3 Certificate in Indian Head Massage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ABC Level 3 Diploma in Reflexology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For office use only

Interview date booked:

Result of Interview:

Actions Taken:

Name: _____

Address: _____

Post Code: _____

Tel: Home _____ Mobile _____

E-Mail: _____

Age on 31st July 2010

Please tick

1	16—19 years on 31st July 2010	4	Over 25 yrs.
2	19-25 on 31st July 2010 with less than 5 GCSE C grades	5	18-25 with more than 5 GCSE
3	Receiving benefits		

If you have ticked 1-3 non-refundable deposit of £60 is required with application.
If you have ticked box 4 or 5; 10% of the course fee is required with the application.

1. Briefly describe your understanding of the role of a Therapist/Technician:

2. Identify the desirable characteristics of a Beauty Therapist/Complementary Therapist/Nail Technician: *(delete as appropriate)*

3. State your strengths and explain why you feel you should be given an opportunity to train with Phoenix Holistic Beauty & Nail Training Ltd:

4. Supporting comments/information:

DECLARATION: I accept that admission and full funding for the course is subject to successful completion. If I withdraw I will be liable to pay the proportion of fees not claimed through the Learning Skills Council (LSC). If I do not achieve then a completion fee will be charged.

Signed: _____

Name: *(in capitals)* _____ Date: _____