**UNISON EAST MIDLANDS COURSE APPLICATION FORM**

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| **HOW TO APPLY**Complete this Application Form and the Proportionality & Fair Representation Form (P&FR) and return both by the closing date to UNISON Learning & Member Development (LMD), UNISON Regional Office, Vivian Avenue, Nottingham NG5 1AF or via email to LMD@unison.co.uk. NOTE: Applications may be declined if both forms are not submitted.Forms require a branch signature for ALL activists courses where a course fee is payable by the branch or where members wish to claim expenses for FREE courses. Course places are not allocated until after the closing date. Where courses are oversubscribed a selection process will be undertaken based on information supplied on the P&FR form. |

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| **Course Title:**  |
| **Date(s):**  |
| **Course Code:**  |

**Location / Venue:**

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| **We use this information to add your name to the training database****for this event and****to update your UNISON membership details****Gender is used to ensure equal access to all gender groups** | **Membership No**. **Full Name**:  |
| **Home address:** **Postcode:** **Contact number** (day time): |
| **[ ]  Female [ ]  Male [ ]  Identify in some other way**  |
| **Details of the course will be sent by email so please give the most suitable**  | **Email:**Enter your email details above if you require an acknowledgement of your application – this is not a guarantee of a place – this email address will also be used to provide you with further course information **[ ]** Tick this box if you give consent for UNISON to contact you by email about other matters relating to UNISON |
| **This information****tells us if you have specific requirements that will assist you to participate fully in the course . This will be shared with the course tutor to ensure your needs are met****We use this information to help verify which branch you belong to** | **Dietary requirements** – please be specific**Facilitation requirements** – please give details (eg learning support, large print, braille, coloured paper or disabled access/parking) **Branch Name:**  |
| **This information indicates you require a claim form for care which will be sent with the course joining details if a place is confirmed****If you have requested travel expenses and the branch have NOT signed the form we will forward this form to your branch for approval** | **Dependant Care** **[ ]**  Tick here if you wish to claim care allowance for a child/adult dependant for additional costs you may incur whilst at the course**Expenses****[ ]**  Tick here if you wish to claim travel expenses if you are successful in gaining a place – your form will be sent toNOTE: Branch approval is not required for acceptance onto FREE member courses but if you wish to claim expenses your application will require branch authorisation prior to attendance |
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**Declaration and signature**

Applicant’s signature: Date:

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| **This section must be completed by the Branch Secretary or Education Co-Ordinator**  |
| This application is approved by the branch who accept the terms and conditions of this booking and agreed to abide by ALL charges including non-attendance/cancellations fees as advertised in the Education Programme or specific course advertisementPrint Name: Signature:Branch Position: Date: |

Please note that your name and branch will be used on the course register provided to the tutor and/or registration desk. Details of your course attendance will be shared with your branch to update branch training records and where necessary for the invoicing of course fees.

**Any information given will be treated in the strictest confidence and will only be used for the purposes stated on the form. This form and any attachments will be securely stored and destroyed after one year.**

For more information on how UNISON uses your personal data

please go to: [www.unison.org.uk/privacy-policy](http://www.unison.org.uk/privacy-policy)

**UNISON EAST MIDLANDS TRAINING**

**PROPORTIONALITY & FAIR REPRESENTATION FORM (P&FR)**

UNISON is committed to achieving fair representation and proportionality in all its structures. The Regional MORE (Members Organising Recruiting Educating) Committee asks each course applicant to fill in this form to assist us in achieving this aim. This information is used to select, monitor and evaluate participation in regional education/branch training opportunities.

NOTE: You do not have to disclose this information to your branch. You may prefer to send this form separately and direct to UNISON Learning & Member Development Team (LMD), UNISON Regional Office, Vivian Avenue, Nottingham NG5 1AF or to LMD@unison.co.uk.

All information will be treated in absolute confidence. UNISON will store this data securely for one year then it will be securely destroyed.

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| **NAME** |  |
| **MEMBERSHIP NO** |  |
| **BRANCH** |  |
| **COURSE TITLE/DATES** |  |
| Have you previously applied for a course and been rejected? If “YES” please state reasons:❒ Course Cancelled ❒ Course Oversubscribed ❒ Other – please state |

Please tick the following boxes that apply

**1. Which of UNISON’s service groups are you in?**

❒Local Government ❒Health Care ❒Higher Education

❒Energy ❒Police & Justice ❒Community

❒Water, Environment and Transport

**2. Are you?**  ❒ Female ❒ Male ❒ Identify in some other way

**3. How would you describe your ethnic origin?**

❒ 4 Bangladeshi ❒ 3 Chinese ❒ 5 Indian ❒ 6 Pakistani

❒15 Asian UK ❒ 8 Asian Other ❒ 0 Black African ❒ 1 Black Caribbean

❒14 Black UK ❒ 2 Black Other ❒ 12 White UK ❒ 11 Irish

❒13 White Other ❒ Other mixed heritage

**4. Do you describe yourself as one of the following:**

 ❒ A Disabled person ❒ LGBT+

**5. What is your age group?** ❒ 16 - 26 ❒ 27 - 39 ❒ 40 - 49 ❒ 50+

**6. Which UNISON subscription band are you in?**

Band Yearly income £ Band Yearly income £

❒ A Up to 2,000 ❒ B 2,001 to 5,000

❒ C 5,001 to 8,000 ❒ D 8,001 to 11,000

❒ E 11,001 to 14,000 ❒ F 14,001 to 17,000

❒ G 17,001 to 20,000 ❒ H 20,001 to 25,000

❒ I 25,001 to 30,000 ❒ J 30,001 to 35,000

❒ K 35,000 +

**7. How many hours per week do you work?**

❒ Less than 16 ❒ 16-29 ❒ 30-34 35 or more