

*Candidate
Registration Form*

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| NOTE: For best results and to avoid delay in processing, this form can be downloaded from our website: [www.childcentraltraining.co.uk/about/forms](http://www.childcentraltraining.co.uk/about/forms) and completed on the computer and emailed to katrina@childcentraltraining.co.uk. If written out, the form should be completed using BLACK INK and BLOCK CAPITALS. |

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| **Please detail what the change is and complete the appropriate section in the form below** |
| Click here to enter text. |

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| **Personal Details** |
| Current Course |
| Click here to enter text. |
| First Name | Middle Initial | Surname |
| Click here to enter text. | middle | Click here to enter text. |
| Date of Birth | Scottish Candidate Number |
| Click here to enter text. | Click here to enter text. |
| Home Address |
| Click here to enter text. |
| Post Code | Email Address (In BLOCK CAPITALS if WRITTEN) |
| Click here to enter text. | Click here to enter text. |
| Home Phone Number | Mobile Phone Number |
| Click here to enter text. | Click here to enter text. |

**IF YOU MOVE HOUSE DURING YOUR COURSE PLEASE INFORM US ASAP.**

Please complete the appropriate form in the MOODLE Common Room and return to katrina@childcentraltraining.co.uk

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| **Workplace Information** |
| **Place of Work** | **Workplace Phone Number** |
| enter code. | enter code. |
| **Workplace Address** | **Post Code** |
| enter code. | enter code. |

F*orm Last Updated August 2017 by Alison Stewart*