**2023/2024 APPLICATION FORM**

# Continuing Professional Development

**In order to qualify for funding you must:**

1. **Have been employed as a permanent employee in Haringey for at least 12 months in a relevant area and meet the specific course requirements** (some professional programmes require 2 years post-qualifying experience)
2. Have discussed, agreed and recorded this development within your 1:1 and My Conversation meeting
3. Have agreed the development opportunity in a My Conversation meeting. The form must be signed by your line manager and Head of Service before submitting
4. Have and submitted an up to date and accurate record of your development activities
5. Make a cogent argument for applying for the course and how it meets Service priorities. Please consider work/course balance

**Funding is not automatic. All applications will be subject to an internal short- listing process which may include an interview. Successful applicants will then be required to follow the University application process.**

**Guidance for completion of the Application Form**

* You must demonstrate ability to study at post-qualifying level by making reference to any previous studying you have undertaken as well as your readiness for further professional PQ study/training.

* You must outline whether you have started and/or completed previous PQ courses.

* You must demonstrate how you propose to manage the workload incurred by completing this programme of study including studying outside of work time.

* You must demonstrate how the course you are applying for will meet your learning needs.

* You must demonstrate how you propose to transfer your learning into practice.

**APPLICATIONS MUST BE FULLY COMPLETED AND SUBMITTED BY 27/04/23**

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| **Personal Details** |  |  |
| **Surname**  **Forename/s** |  |  |
| **Directorate:** |  |  |
| **Payroll number:** |  |  |
| **Current Grade:** |  |  |
| **HCPC Registration Number:** |  |  |
| **Job title:** |  |  |
| **Workplace address/contact details:** |  |  |
| **Line Manager:** |  |  |
| **Service Manager:** |  |  |

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| **Module/Programme details – What are you applying for?** | |
| **Qualification:** |  |
| **Module Code:** |  |
| **Name and address of learning provider:** |  |
| **Date of course:** |  |
| **Length of course:** |  |
| **Fees:** |  |

**Have you ever enrolled on a CPD (PQ) course and not completed it? Please give details below of the course title, course date(s) and why it was not completed:**

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| **Professional/ Your Relevant Work Experience** | |
| **Job Title, nature of**  **work/ training**    **Organisation:**  **Dates:** |  |
|  |
| **Job Title, nature of**  **work/ training**    **Organisation:**  **Dates:** |  |
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| **Relevant Qualifications : What you have done before** | |
| **Qualification title:** |  |
| **Grade:** |  |
| **Institute attended:** |  |
| **Qualification title:** |  |
| **Grade:** |  |
| **Institute attended:** |  |
| **Qualification title:**  **Grade:**  **Institute attended:** |  |
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| **CPD** |
| **Social Work England require you to:**   * **maintain a continuous, up to date and accurate record of CPD activities and link these to the relevant professional standards** * **demonstrate that your CPD activities are a mixture of formal and informal learning activities relevant to current or future practice** * **seek to ensure that your CPD has contributed to quality of practice and service delivery** * **seek to ensure that your CPD benefits the service user** |
| **Please submit a copy of your last 12 months CPD log with this application** |

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| **Personal Supporting Statement** |
| **Please give reasons for applying to undertake a qualification in academic year 2023/2024. The following must be included:**   * **Date you qualified (eg as a social worker)** * **How it will meet your learning needs - How it links to your performance objectives, how it links to the Professional Capabilities Framework & KSS** * **How you will transfer learning into practice** * **How it will improve quality of your practice** * **How it will link to quality of service delivery**   **Please also comment on how you will manage the workload incurred by undertaking this programme of study** |
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| **Continued from previous page** |

## Personal Statement

## e Managers Supporting Statement: Line Manager Reference

**Applicant is not on long term sick/ subject to formal sickness monitoring Y/N**

**Applicant is not part of a disciplinary process Y/N**

**There is no concern about applicant’s current performance Y/N**

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| **Managers Supporting Statement:** |
| **Please show how the proposed Programme of study links to their work objectives/Workforce Plan and Development plan/ and an endorsement of the applicant.** |

**How will you ensure the learning is brought back to your team and how will it benefit your service users?**

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**Please comment on how you plan to manage the applicant’s absence whilst they are undertaking this course:**

**Line manager’s signature:**

**Line manager’s name**

**Date:**



**Service manager’s approval (signature):**

**Service manager’s name:**

**Date:**



**Undertaking to stay in Haringey Council Employment**

***National Scheme of Conditions of Service***

In signing the undertaking you are agreeing to:

1. Remain in Haringey Council employment for **2 years** from the date of completing the course. If you leave Haringey Council service before the 2 years have expired you will be required to refund all financial assistance which you received during the duration of your course (except salary). Only in exceptional circumstances, which will be waived at the discretion of the Director, will a nil payment be considered. An important principle of the Scheme is that no one should lose or gain financially.

1. If you fail a module the first time, reasonable facilities will be provided for a second attempt, as long as you made satisfactory progress in your studies and merit further assistance. Assistance does not include full time secondment. if you fail at the second attempt all further assistance will be withdrawn.

1. If you do not submit your work at the appropriate time, discontinue the course or fail to show satisfactory progress in your studies, you will be required to refund all financial assistance provided.

*I have read and agree to abide by the conditions under the PQ Training Scheme and agree to remain an employee of Haringey Council for a period of no less than 2* ***years*** *from the date of attaining the qualification for which I have been sponsored. If I leave Haringey Council before the year has expired, I will refund all financial assistance (except salary) which I received during the duration of my course. I*

*agree to this refund being deducted from my salary, (unless a prior arrangement to repay the outstanding amount has been agreed). I understand that I will have to make arrangements to repay the balance where my salary does not cover the amount outstanding.*

*If I do not pass the examination, discontinue the course or fail to show satisfactory progress I will reimburse all financial assistance provided (except salary). I agree to such a reimbursement of financial assistance being deducted from my salary.*

**Signed:**

**Name: Date:**

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| **EQUALITIES MONITORING**  **Please appropriate box below** | | | | | | |
| Gender | | | |  Male | |  Female |
| Disability | | | |  Yes | | No |
| Do you have any special/specific requirements? e.g. Learning Support | | | |  Yes | | No |
| If yes, may we contact you to discuss how these needs can be met? | | | |  Yes | |  No |
| **What is your ethnic group?** *(Please tick one box from the appropriate section)* | | | | | | |
| **White** | **Mixed** | **Asian or Asian British** | **Black or Black British** | | **Chinese or other ethnic group** | |
|  British |  White & Black Caribbean |  Indian |  Caribbean | |  Chinese | |
|  Irish |  White &  Black African |  Pakistani |  **African** | |  | |
|  Greek-Cypriot |  White &  Asian |  Bangladeshi |  | |  | |
|  Turkish-Cypriot |  |  East African  Asian |  | |  | |
|  Kurdish |  |  |  | |  | |
|  Turkish |  |  |  | |  | |
| **Any other White background**  Please write in | **Any other mixed background**  Please write in | **Any other Asian background**  Please write in | **Any other Black background**  Please write in | | **Any other ethnic group** Please write in | |
| 1. *Greek-Cypriot, Turkish-Cypriot, Kurdish, Turkish and East African Asian are classifications that have been added to Haringey Council forms.* 2. *For monitoring purposes the Irish, Greek-Cypriot, TurkishCypriot, Kurdish and Turkish classifications are counted as ethnic minorities* | |  | **The same classification should be used for employment service delivery monitoring.**    **Equalities monitoring data should be collected through self-classification rather than officers making decision on a client’s behalf.** | | | |

**Data (Information) Collection Statement**

“Haringey Council requires the preceding information for the purpose of evaluating your application and ensuring we comply with our obligation to positively promote equalities and ensure equity of access to training. We undertake not to process your information in any manner incompatible with the stated purposes or to disclose this information to any third party without your consent, unless obliged by law to do so.”

**Data (Information) Security Statement**

Haringey Council intends to fulfil all its obligations under the Data Protection Act 1998. The Council will ensure that all processing of data falling within the scope of the Act is appropriately notified to the Information Commissioner. Individuals whose information is held and processed by Haringey Council can be assured the information will be maintained in confidence and treated with all due care.

Haringey Council tries to keep information held about you accurate and up-to-date. However if you find any inaccuracies you have the right to have them corrected.

If you have any concerns about the processing of information by Haringey Council you may contact the Data Protection Manager, River Park House, 8th Floor, 225 High Road, Wood Green, London, N22 8HQ or the Information Commissioner, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF.