### **Continuing Professional Development Modules**



# School of Biological, Earth and Environmental Sciences, UNEP GEMS

## **Application Form 2023-24**

Please complete all sections using BLOCK LETTERS or type.

| Title:                     | First Name:                          | Surname:  |
|----------------------------|--------------------------------------|---|
|                            |                                      |   |
| (Ms., Mr., Mx., Dr., etc.) |                                      |   |
| You will be regist         | ered as per the name presented on    | your Birth Certificate.   |
| If you wish to be r        | registered by another name, i.e. a m | arried name you must also attach the relevant certificate.                                    |
| Date of Birth:             |                                      |   |
| Country of Birt            | :h:                                  | Nationality:  |
| Gender:                    |                                      | (Either Female/Male. For statistical purposes only, <i>NOT</i> part of the selection process) |
| PPS Number:                |                                      | (Only applicable to Irish Applicants)   |
| Permanent Ad               | dress:                               | Address for Correspondence (If different):  |
|                            |                                      |   |
|                            |                                      |   |
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|                            |                                      |   |
|                            |                                      |   |
|                            |                                      |   |
| Tel. No.:                  |                                      |   |
|                            |                                      |   |
| E-mail:                    |                                      | (Communication is primarily by email)   |
|                            |                                      |   |
| UCC Student N              | umber: (If previously registered in  | u.C.C. or registered with Adult Continuing Education U.C.C.)                                  |
|                            |                                      |   |
|                            |                                      |   |
| For Office Use:            |                                      |   |
|                            |                                      |   |
|                            |                                      |   |
|                            |                                      |   |
|                            |                                      |   |

# Please supply your membership number for the relevant professional body, if applicable: International Water Association Charted Institution of Water and Environmental Management Other

#### **Professional Qualifications:**

| Qualification | Institution | From – To | Award & Date |
|---------------|-------------|-----------|--------------|
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**Professional Experience** (Starting with current place of work, please continue on a separate sheet if necessary):

| Name and Address of<br>Current Employment | Position Title And Type of Experience<br>(Acute, Long-term, Older Patients, etc.) | Dates: From -To<br>No. of Years In This Role |
|---|---|--|
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#### Module **Module Title** Credits Semester Closing Please Date Select EV6012 Freshwater Monitoring Programme Design 5 31/07/23 1 31/07/23 EV6013 Quality Assurance for Freshwater Quality Monitoring EV6014 Data Handling, Assessment & Presentation Freshwater 1 31/07/23 **Quality Monitoring** Water Quality Monitoring & Assessment in Rivers, EV6015 5 1 31/07/23 Lakes & Reservoirs EV6016 Water Quality Monitoring & Assessment of 5 1 31/07/23 Groundwater EV6017 Freshwater Quality Monitoring with Biota and 5 1 31/07/23

School of Biological, Earth and Environmental Science CPD for 2023-24

You may apply for up to 3 modules per application. If you are applying for more than one module please highlight your order of preference, i.e. put 1, 2, 3.

| TOEFL Score:                      | IELTS Score:                       | Date of Last TOEL/IELTS Exam: |
|-----------------------------------|------------------------------------|-------------------------------|
| To be completed by applicants wh  | nose first language is not English | :                             |
| Are you being funded by an outsic | le agency/employer?                |                               |

# **Important Information:**

#### If you have previously registered in University College Cork:

You must provide the following with this completed application form:

- If you have changed your name since you previously registered and wish to update same, please submit a copy of your new certificate, i.e. a marriage certificate.
- If you have already registered for a CPD in the previous academic year (2022-23) all of your supporting documentation will be on file – you do not need to resubmit these.

#### If you have not previously registered in University College Cork:

You must provide the following with this completed application form:

- A copy of your Birth Certificate or Passport.
- College Transcripts in English.

Particulate Matter

- If you wish to register in a name other than your birth name, please submit a copy of your new certificate, i.e. a Marriage Certificate along with your Birth Certificate.

| De | eclaration: I hereby declare that all information provided on this form is true and accurate.  |
|----|--|
|    | year.  |
|    | Incomplete application forms will not be sent to the School for consideration of an offer.  Please note that correspondence will be by e-mail. Students can take a maximum of 15 credits in any or |
|    | If English is not your first language please also supply your English Language Exam certificate.  Incomplete application forms will not be sent to the School for consideration of an offer.       |
|    |  |