



ICEP
e u r o p e

Institute of Child Education & Psychology

**Quality Assured Online Courses
CPD Application Form**

**ENROL ONLINE AT www.icepe.eu
OR FILL IN DETAILS BELOW**

PERSONAL DETAILS

*** required entry**

Have you ever participated in an ICEP course before?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
First Name(s):		Surname:	
If your first name or surname is different from the above on official records please enter below.			
First Name(s):		Surname:	
Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Address:			
Home Phone:	Work Phone:	Mobile Phone:	
E-mail:			
PLEASE NOTE: As this is our main contact for you please check that your email address is accurate and that your email account is active. Please add info@icepe.eu to your contacts list to ensure that you can receive emails from us.			

*** OCCUPATION**

<input type="checkbox"/> Teacher (please specify role):			
<input type="checkbox"/> Special Needs Assistant	<input type="checkbox"/> Psychologist	<input type="checkbox"/> Other (please specify):	

*** SCHOOL DETAILS (Required for subsidised fees – ROI Only)**

School:	School Roll:
Address:	
School type: Primary <input type="checkbox"/> Post Primary <input type="checkbox"/> Special <input type="checkbox"/>	Teacher/Payroll No:

CPD COURSE LISTING (Please tick relevant box/es) *

Course	Code	DES Subsidised Fee	Full Fee
Advanced Teaching Skills for Classroom Management			€99 <input type="checkbox"/>
Teaching Happiness: Positive Psychology for Behaviour & Learning NEW			€99 <input type="checkbox"/>
		DES Subsidised Fee	Full Fee
Down Syndrome	(ICEP05)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Supporting and Managing Student Behaviour	(ICEP10)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Inclusion	(ICEP09)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Dyslexia	(ICEP06)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Understanding Autism	(ICEP04)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Attention Deficit Hyperactivity Disorder	(ICEP02)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Applied Behaviour Analysis	(ICEP01)	€190 <input type="checkbox"/>	€510 <input type="checkbox"/>
Teaching Gifted and Talented Students	(ICEP07)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Teaching Troubled Children	(ICEP11)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
Asperger Syndrome	(ICEP03)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>
General Learning Disabilities	(ICEP08)	€150 <input type="checkbox"/>	€330 <input type="checkbox"/>

ILG Courses (Available during Summer Term Only)			Full Fee
Teaching & Learning with Today's Technologies (offered in partnership with the Inclusive Learning Group)			€99 <input type="checkbox"/>
Differentiation for Inclusion (offered in partnership with the Inclusive Learning Group)			€99 <input type="checkbox"/>

TERM (Please Specify) *

Spring 2010	<input type="checkbox"/>	Summer 2010	<input type="checkbox"/>
Autumn 2010	<input type="checkbox"/>		

SUBSIDISED FEES:

**** SESS Subsidised fees apply only to currently employed teachers in the Republic of Ireland ****

These courses are part-funded by the Special Education Support Service and the Teacher Education Section of the Department of Education and Science under the National Development Plan.

Please note that in order for the subsidised fee to be drawn down from SESS, verification from your school that the course is relevant to the post you hold and the associated educational needs of the students in your care is required. A form to be signed by school authorities will be issued to you with your username and password. This form must be returned to ICEP Europe at your earliest convenience or by 10th September 2010 at the latest.

PAYMENT OPTIONS: *

<input type="checkbox"/> I enclose a cheque / Postal Order / Banker's draft (payable to ICEP Europe)		€
I wish to pay by <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Laser		€
Card No.		
Card Expiry Date:		* CVV:
I have read the <u>terms and conditions</u> and agree to accept them		
* Signature		* Date:

(VISA & Master card only: The CVV is the last 3 digits of the number on the back of your credit card)

HOW DID YOU HEAR ABOUT ICEP EUROPE? *

Please indicate how you heard about ICEP Europe			
Surfing the Internet	<input type="checkbox"/>	Previous ICEP Student	<input type="checkbox"/>
Colleagues	<input type="checkbox"/>	ICEP Email	<input type="checkbox"/>
ICEP Poster/Flyer	<input type="checkbox"/>	Magazine Advert	<input type="checkbox"/>
Conference/Exhibition	<input type="checkbox"/>	Other (Please Specify)	<input type="checkbox"/>
Word of Mouth	<input type="checkbox"/>		
I would like to be notified by ICEP Europe about other courses. Yes <input type="checkbox"/> No <input type="checkbox"/>			

Please Note:

Your application cannot be fully processed until payment is received. Once your application form has been processed, an email will be sent to your email account with instructions on how to create your own username and password to access the course content.

If you do not receive this email please contact us at +353 (0)1-6510618 or email info@icepe.eu

For Terms and Conditions, please go to <http://www.icepe.ie/terms.html>

Profexcel.net Limited t/a ICEP Europe, Unit 4K, Maynooth Business Campus, Maynooth, Co Kildare.

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