**CHRIST THE REDEEMER COLLEGE**

**SUNDAY SCHOOL TEACHERS**

**AND YOUTH WORKERS**

**SUMMER TRAINING COURSE APPLICATION FORM**



Attach photo here

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| **Personal Information** | | | | |
| Gender: □ Male □ Female | Contact Address:………………………………………………………………………………......... | | | |
| Title (Mr, Mrs, Pastor etc): | …………………………………………………………………………………………………………………. | | | |
| First Name: | …………………………………………………………………………………………………………………. | | | |
| Last Name: | Postcode: | | | **Office Use Only** |
| Nationality: | Home Telephone: | | | Date Received: / / |
| Date of birth (dd/mm/yy): / / | Work Telephone: | | | Status: □ Pending □ Approved |
| Email: | Mobile: | | | Reference: |
| Name of Church: | | | | |
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| **Course Information** | | | | |
|  | | | | |
| **Sunday School Teachers** | |  | | |
| **Christian Youth Workers** | | | | |
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| **Additional Information** | | | | |
| Do you have any previous theological training? □ Yes □ No | | | | |
| If yes, please complete below. | | | | |
| Name of Institution: | | | | |
| Name of Qualification: | | | | |
| Level of Qualification: | | | Year Obtained: | |
| Telephone: | | |  | |
| Email: | | |
| I (the applicant) understand that I will be enrolled and invoiced for the course to which I am applying to study. | | | | |
|  | | |  | |
| **Signature:………………………………………………..** | | | **Date (dd/mm/yy):** / / | |
|  | | | | |
| |  | | --- | | **Data Protection Statement:** All data are retained by CRC and treated confidentially. By completing this application form you consent to your data being made available for official purposes, through our student administration system, **and** administrative and academic staff.  For enquiries call: Tel: **020 8429 4356**, email info@christredeemer.ac.uk or visit www.christredeemer.ac.uk  **The completed form should be returned to:**  Christ the Redeemer College,  The Rayners. 23 Village Way East.  Harrow. HA2 7LX  Middlesex | | | |  | |