



NUI Galway
OÉ Gaillimh

Specialist Certificates in Health Promotion

Autumn 2011

Closing Date: Friday, 29th July, 2011

Affix applicant's
photograph

Surname

First name/s:

Full name as stated on birth certificate

Ms Mr Mrs Female Male

Date of birth

PPSN number

Country of birth

Nationality

Have you previously studied at NUI, Galway?

If so, state your Student ID number

Address for correspondence *please ensure you are contactable at this address at all times*

Telephone (mobile)

Telephone (daytime)

Email

Youthwork

Disability Services

Oral Health

Sexual Health

Community Development Settings

Training and Education Centres

Previous Education
Previous Educational Experience

Employment History commence with the most recent	
Application forms should be returned on or before: 29th July, 2011	
To: Anne O'Grady, Discipline of Health Promotion, Clinical Science Institute, NUI, Galway, Galway.	

I acknowledge that the particulars given in relation to this application are in all respects true.

Signature

Date

Please enclose this itemised documentation to allow your application be processed.	<ul style="list-style-type: none"> <input type="radio"/> Fully completed application form <input type="radio"/> Passport photograph <input type="radio"/> Non refundable application fee of €30 (money order or postal order, cash will not be accepted) <input type="radio"/> Copy of birth certificate <input type="radio"/> Copy of marriage certificate, if you wish to be registered under your married name. <input type="radio"/> International Language Testing System (ILTS) certificate /TOFEL (for applicants whose first language is not English) <input type="radio"/> Personal statement (max 200 words) see below:
--	--

Personal Statement – your interest and suitability for participation in this Specialist Certificate training course:

Please submit a minimum of 200 words here outlining the following:

- **Your interest / motivation for participating in this training course;**
- **How you feel you meet the selection criteria specified in relation to this course;**
- **Why you feel you are a suitable participant for this course;**
- **How you can apply your learning from this course to support your organisation / centre / service to be more health promoting;**