

**Training Programme Application Form**

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| **1. Programme –** please tick appropriate box | | | | |
|  | Fishing Vessel Engineering Skills | | | |
|  | Marine Engineering Processes and Operations | | | |
| Location | | Choose an item. | Commencement Date | Click or tap to enter a date. |

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| **2. Personal Details** | | | | | |
| First Name(s) | Click or tap here to enter text. | Surname | | Click or tap here to enter text. | |
| Address | Click or tap here to enter text. | | | | |
|  | Click or tap here to enter text. | | Eircode | | Click or tap here to enter text. |
| Email Address | Click or tap here to enter text. | | | | |
| Telephone Number (mobile) | Click or tap here to enter text. | | | | |

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| **3. Entry Requirements –** Q1 & Q2 are applicable to **both** programmes, Q4, Q5, Q6, Q7 & Q8 are applicable to Fishing Vessel Engineering Skills only. **Please refer to the course brochure when completing this section.** | | | | | | | | | | |
| Q1 | Junior Cycle (or equivalent) |  | No | | Yes | Year | Click or tap here to enter text. | Math’s Grade | | Click or tap here to enter text. |
| Q2 | Please give details of your highest Math’s grade to date e.g. Leaving cert – Ordinary Level B | | | Click or tap here to enter text. | | | | | | |
| Q3 | Marlins Test, if applicable |  | No | | Yes | Result | Click or tap here to enter text. | | | |
| Q4 | BIM Deckhand Programme |  | No | | Yes | Year | Click or tap here to enter text. | | | |
| Q5 | Seafarer Medical Certificate (ENG 11) |  | No | | Yes | Expiry | Click or tap to enter a date. | | | |
| Q6 | Please indicate which entry route is being applied |  | Option 1 | | Option 2 | | | | | |
| Q7 | Please give details of STCW Certificates, if applying under Option 2 (Alternative Entry Route) | | | | | | | | | |
| **STCW Course** | | | **Course Provider** | | | | | **Date Completed** | |
| Personal Survival Techniques | | | Click or tap here to enter text. | | | | | Click or tap to enter a date. | |
| Fire Fighting and Fire Prevention | | | Click or tap here to enter text. | | | | | Click or tap to enter a date. | |
| Elementary First Aid | | | Click or tap here to enter text. | | | | | Click or tap to enter a date. | |
| Personal Safety and Social Responsibilities | | | Click or tap here to enter text. | | | | | Click or tap to enter a date. | |
| Q8 | Please give details of sea time on Declaration of Sea Service form (supplied by BIM), if applying under Option 2 (Alternative Entry Route) | | | | | | | | | |

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| **4. Learner Supports/Reasonable Accommodation** |
| If you have an access issue, or wish to disclose a disability, specific learning difficulty, or health issue, please contact BIM’s access officer on 01 2144100 or email: [accessofficer@bim.ie](mailto:accessofficer@bim.ie)  Alternatively, you can discuss with your trainer or the course administrator. |

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| **5. Data Protection** |
| BIM is compliant with all relevant Data Protection Legislation, including the General Data Protection Regulation (GDPR) and  the Data Protection Act 2018. The data you provide will only be retained and processed for the purposes described in the  [BIM Privacy Policy](https://bim.ie/about/corporate-governance/privacy-policy/). This policy and the [BIM Data Protection Policy](https://bim.ie/about/corporate-governance/data-protection/) are available at [bim.ie](https://bim.ie/) for your review. |

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| **6. Declaration** | | | |
| I confirm that the details I have given are accurate and correct to the best of my knowledge and that I meet the entry requirements as outlined in the course brochure and/or on the BIM website. I agree that my data may be used in line with BIM’s data protection policy. | | | |
| Applicant Signature | Click or tap here to enter text. | Date | Click or tap to enter a date. |

Please email the completed application form to: [**training@bim.ie**](mailto:g@bim.ie)or post to:

National Fisheries College of Ireland

Greencastle Co. Donegal F93 PX32

