



## NEBOSH NATIONAL DIPLOMA Delegate Assessment Declaration

**4. About your proposed learning plan – please tick  as appropriate the relevant**

Did you request to come on this course  or were you sent?

Yes    No

Are you intending to do all three units in one six month period?

If not please specify intensions:

Are you planning to attend other major courses at the same time as this one?

If so, do you feel you can give sufficient time to both?

Do you feel your work commitments will help  or hinder  your learning plan?

*Are you able to give time commitment to:*

Yes    No

Tutor Directed study (involving personal development exercises), 2 hours in the evenings of course?

Tutor Directed study (involving personal development exercises), 10 hours between study periods?

Private study (involving reading and revision) outside course time – Unit A 75 hours, Unit B 50 hours, Unit C 50 hours, Unit D Assignment 50 hours?

Assignments (involving practical project work and written reports) in own workplace?

Is your employer committed to allowing you time for your assignments during your normal working hours?

Are you conducting an NVQ at the same time as this course?

If so, level and subject:

Do you consider that you have basic skills in the following: *(comment if required)*

Yes    No

Reading

Writing

Mathematics

**5. Entry requirements for Diploma**

**Indicate with a  if you have any of the following courses:**

NEBOSH National General Certificate in Occupational Safety and Health ~ Unitised syllabus?

NEBOSH National General Certificate in Occupational Safety and Health ~ prior syllabus?

NEBOSH National Certificate in Construction Safety and Health ~ Unitised syllabus?

NEBOSH National Certificate in Construction Safety and Health ~ prior syllabus?

NEBOSH International General Certificate in Safety and Health?

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TUC Certificate in Occupational Health and Safety (minimum of 16 credits at level 3)?

Level 3 NVQ or SVQ in Health and Safety in the Workplace?\*

Level 3 NVQ or SVQ in Health and Safety in Occupational Health and Safety Practice?\*

A qualification that satisfies the academic requirements for entry to IOSH TechIOSH?

### 5.1 Non-Specified Course attended:

A degree or postgraduate diploma in a relevant subject? Please specify

British Safety Council Diploma?

British Safety Council Certificate?

Other? Please specify and attach supporting information

#### PLEASE NOTE:

*Delegates for the NEBOSH National Diploma must return evidence that they are a 'holder' of the qualification(s) stated above. A copy of your Diploma or a copy of your 'pass' letter, will be appropriate. (DO NOT SEND ORIGINALS).*

*Delegates with no health and safety qualifications will be required to carry out prior study before the start of the course. NEBOSH strongly recommend study to National General Certificate level or equivalent. Alternatively you may consider self study utilising the current version of the NEBOSH Study book for the National General Certificate in Occupational Safety and Health ~ Unitised syllabus, published by RMS publishing and available through ACT at a cost of £34.95 plus carriage (and VAT as appropriate). This is an essential requirement, because the Diploma course structure assumes knowledge to this level is already held by attendees.*

*Holders of qualifications marked with an \* should purchase the NEBOSH study book to supplement their learning, preferably before joining the Diploma course of study.*

### 5.2 Study details:

Date: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Method of Study:

Self Study  Part time (day/evening per week) .....No. of days

Open/distance learning  Full time short (1 week modules) .....No. of days

Full time intensive course < 10 days .....No. of days

Examination Result:  Distinction  Credit  Pass

Where did you study?

Certificate/Diploma No.:

Photo copy attached:  of Certificate/Diploma  of 'Pass' letter

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### 6. Qualifications

Please list, with dates and grade, awards to date.

Date	Award	Grade	Professional Body

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## 7. Professional Body Membership

Please list, with details of professional body membership.

Professional Body	Grade Membership	Membership No.

## 8. Work Experience

Please list relevant work experience over the past 5 years. Include job title, responsibility and approximate length of experience. Please include dates.

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### 9. Other Comments

Please provide details of any other aspects not covered elsewhere that you feel are relevant to your application.

The above information is an accurate representation of my current training and experience.

Signed:

Date:

Please return completed form and supporting information to:  
ACT Associates Ltd, Victoria House, 32 Lower High Street, Stourbridge, West Midlands DY8 1TA.  
F.A.O. Events Department. Fax: + 44(0) 1384 442533. Email: [events@actassociates.co.uk](mailto:events@actassociates.co.uk)