



**CPD**

**ACCREDITATION**

**APPLICATION FORM**

## **APPLICATION FORM**

Thank you for your interest in having your CPD course IFA approved. To formally apply for approval please complete this application form for each course you wish to be approved and send to [office@ifaroma.org](mailto:office@ifaroma.org). Please note the £25.00 fee for course review is non-refundable, therefore applicants are reminded to complete this form in full and provide all relevant copies of certificates and course material when applying.

The application and all additional notes must be provided in **ENGLISH** to be sent to the Education Committee.

Please see below approval fees. Approval lasts for twelve (12) months and is renewable annually.

<b>SERVICE</b>	<b>FEES</b>
<b>Review Fee</b>	£25.00
<b>One Course</b>	£100.00
<b>Three Courses</b>	£250.00
<b>Five Courses</b>	£400.00
<b>Additional Tutor</b>	£50.00
<b>Amendments to Listings</b>	£10.00 per event
<b>CPD Certificates issued by IFA (displaying our logo)</b>	£10.00 per certificate

Once we receive your application, we will review the information and request additional information if required. During the review, the IFA may ask that course content is adapted and or highlight any areas that require improvement. The applicant will be required to make the changes before approval is granted and invoice issued.

Approved CPD courses will appear on the IFA website within 5 working days of payment and will be displayed for 12 months.

## PROVIDER DETAILS

<b>Business Name</b>	
<b>Address</b> (where invoices will be addressed to)	
<b>Telephone number</b>	
<b>Email Address</b>	
<b>Website Address</b>	

## COURSE DETAILS

<b>Title of Event:</b> The title of the event must reflect the content or aims of the course and avoid misleading claims	
<b>Certificate Title:</b> (if you require us to issue certificates on completion)	
<b>CPD Points:</b>	
<b>Aims:</b> Please provide in bullet point format  <i>NB. If your courses are training in the use of medical or electronic devices or products the IFA cannot at this time approve such courses.</i>	
<b>Learning outcomes</b> Please provide in bullet point format	

<p><b>Event Summary</b> 200 words for website advertisement</p> <p><b>ALTERNATIVELY</b></p> <p>Please provide direct URL link to event below <i>Please note if the information in the URL link is not in English then we will require the event summary written here in English</i></p>	
<p><b>URL Link to event</b></p>	
<p><b>Attached Handouts</b></p>	<p><b>Yes / No / N/A</b></p>
<p><b>Is this a distance learning course?</b></p>	<p><b>Yes / No</b></p>
<p><b>Duration of Course</b> Including number of guided learning hours/self study</p>	
<p><b>Does the course require any prerequisite?</b> If so, please specify.</p>	
<p><b>Will your attendees be assessed?</b> For example, case studies, questions and answers etc.</p> <p>NB. Please note if you would like your attendees to be able to say they have trained in your subject area they must complete a case study element to comply with insurance regulations.</p>	
<p><b>Provide a copy of certificate provided on completion</b></p>	
<p><b>Attendance charge:</b></p>	

**VENUE DETAILS**

<b>Venue Address</b>	
<b>Training venue must comply with the following:</b> <ul style="list-style-type: none"><li>• Adequate Health and Safety provision in accordance with the Health and Safety at Work legislation</li><li>• Good standards of hygiene (enough toilets/ washing facilities)</li><li>• Good ventilation to maintain an appropriate temperature.</li><li>• Adequate lighting</li><li>• Access for all attendees to your visual aids/ multimedia activities</li></ul>	<b>Yes / No</b>
<b>Does the venue have disabled access?</b>	<b>Yes / No</b> If yes, please provide details:
<b>Appointed person responsible for the Health and Safety of the attendees.</b>	
<b>Do you have Public Liability Insurance for this event? If so, please attach a copy to this application.</b>	

**LEARNER EXPERIENCE**

<b>Please attach the following, which will be made easily available to participants:</b>		<b>Complaints procedure</b>
		<b>Cancellation policy</b>
		<b>Attendee Feedback form</b>

## TUTOR QUALIFICATIONS

<b>Tutor Name(s)</b>	
<b>IFA Membership No</b>	<b>YES/NO?</b>  <b>If yes, please include IFA membership number and the following details below do not need to be supplied</b>
<b>Professional Body Membership please list</b>	<b>1.</b>
	<b>2.</b>
	<b>3.</b>
	<b>4.</b>
<b>Do you hold a teaching qualification?</b> If yes, please enclose a copy	<b>Yes / No</b>
<b>Please enclose a copy of your current Teaching Insurance</b> – <i>please note that most basic policies cover you for teaching CPD courses</i>	
<b>Experience applicable to field of course you are applying</b> Please enclose CV	

If you are unable to provide any of the required information, please provide a reason(s)

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## TERMS AND CONDITIONS

These terms and conditions apply to applicants who hold or are seeking to hold IFA approval of their CPD courses. By applying you agree to be bound by the following:

- 1) You will contact the IFA immediately if any of the details provided on this application form changes. You accept that any changes made after approval has been granted may invalidate prior approval and the IFA may withdraw its approval. All changes will remain a prerequisite of re-approval and a £10.00 fee will apply to changes to details.
- 2) You will make any amendments to promotional material of IFA CPD approved status when requested by the IFA.
- 3) You will have appropriate insurance in place to cover all aspects of training.
- 4) You will ensure a safe and suitable venue for the event in line with IFA requirements set herein.
- 5) You will provide good customer service to attendees including any follow up.
- 6) You will provide course participants with a CPD Certificate of attendance. The IFA CPD logo may not appear on any certificates. All certificates bearing the IFA CPD logo (or any IFA logo) may only be issued by the IFA. To be able to distribute CPD certificates with the IFA CPD logo embossed on them these must be ordered via the IFA office and a list provided of each attendee of the course. The fee for each IFA CPD certificate is £10.00.
- 7) The IFA CPD Approved logo may only be displayed throughout the duration you are accredited.
- 8) You will ensure that the IFA CPD Approved logo and advertisement of approved status is only applied to marketing/web pages relating specifically to the IFA approved CPD course(s) only. NB. Approval does not extend to approval or endorsement of any and all of the business's CPD courses or any other such course or activity you provide in general, this must be made clear in advertising.
- 9) The IFA CPD Approved logo may not be changed or distorted from its original form.
- 10) You will ensure that any and all marketing relating to IFA approval is legal, accurate and honest.
- 11) You will pay any applicable fee(s) required and renewal fee(s) prior to due date. NB. Any required approval and renewal fee(s) are non-refundable.
- 12) If approved status is withdrawn you will cease to use the IFA CPD Approved logo immediately and remove all reference to IFA approved status from all documents and web pages.
- 13) You will inform participants that the IFA will not be held accountable or get involved in any outstanding payments, refunds, cancellation fees or any other such financial arrangement between the provider and any participants or third parties.

# DECLARATION

I confirm that I have understood and agree to comply by the terms and conditions of approval.

I declare that I am authorised to submit this application on behalf of the named business and the information provided is my original work, accurate and true to the best of my knowledge at the date of submitting.

Applicants Name:	
Position Held:	
Applicants Signature:	
Email:	
Telephone:	
Date completed:	

# PAYMENT

I authorise the IFA to debit my account: £25.00 to review my course material. This fee is non-refundable.

Name .....

Address .....

Debit/Credit Card details: Solo  Switch  Visa  Visa Electron  MasterCard

Card No: \_ \_ \_ \_ \_

Card Holder Name..... Issue No..... Valid From .....

Expires end ..... Security Code .....



The CSC is 567.

**(Last three digits)**