 

**Application form - Level 2 Surrey Accredited Care Certificate**

 **For Spring 2025 Cohort**

Our 5th Cohort of the Level 2 Surrey Accredited Care Certificate course is running on the following dates and location.

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| **Woodhatch Place. Reigate. Surrey**9.30am- 4.30pmWeek 1: Monday 10th FebruaryWeek 2: Wed 19th FebruaryWeek 3: Wed 26th FebruaryWeek 4: Wed 5th March **Then one week off**Week 5: Wed 19th MarchWeek 6. Wed 26th March Week 7: Wed 2nd April  |

**Places are very limited, the deadline for applications is Friday January 17th 2025 .** Please complete the employer/supervisor section of this application form and then forward this application form to any employees that you would like to be considered for a place on this course. This will help us to make sure that the course is right for them and that any support needs are identified early. Your employee/s will then be invited for an informal chat (via teams) to meet the academy staff to ask any questions and find out more about the course. The final section of this form is a free writing task for your employee to **hand write**.

Return completed forms to: adults.academy@surreycc.gov.uk with the subject heading Care Certificate Application.

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| Part A- For Employer/Supervisor to complete |
| Name of employer or supervisor |   |
| Email and phone number of employer/supervisor |  |
| Name of work-place assessor  |  |
| Name of employee/s you are recommending for a place |  |
| Name of organisation  |  |
| Type of Surrey Heartlands Health and Social Care service (indicate all that apply) | Health Care [ ]  Social Care [ ] LD & Autism [ ]  Nursing Home [ ] Primary Healthcare [ ]  Domiciliary [ ] Other (please specify) [ ]   |
| **Employer/Supervisor Agreement:**I understand that my employee will need to be released from work duties to attend all 7 classroom sessions and complete a portfolio of written and practical evidence. I can provide a work-place assessor to assess the practical standards in the workplace and record these in the student’s portfolio. |
| Signature of Employer/Supervisor |  |
| Date:  |  |
| Part B- For Applicant (Student/employee) to complete |
| Applicant’s Name |  |
| Applicant’s email **and** contact number |  |
| Do you already have Maths GCSE grade C/4 and above or equivalent?  |  Yes [ ]  No [ ]  Don’t know [ ]   |
| Do you already have English GCSE grade C/4 and above or equivalent?  |  Yes [ ]  No [ ]  Don’t know [ ]   |
| What is your first language? | English  |
| How would you grade your digital skills? | Beginner [ ]  Intermediate [ ]  Good [ ]  |
| How long have you been working in health and social care? | Less than 6 months [ ]  6months- 1 year [ ] 1-3 years [ ]  more than 3 years [ ]  |
| Will you be able to attend all 6 sessions of classroom-based training  | Yes [ ]  No [ ]  |
| Can you commit to approximately 20-30 hours (3-5 hours per week) to complete the written assessments?  | Yes [ ]  No [ ]  |
| Do you require any additional learning support (e.g. for dyslexia) or access arrangements:(Please give brief details or tell us about them at interview if preferred) | Yes [ ]  No [ ]  |
| Do you have access to a laptop and good internet service | Yes [ ]  No [ ]  |
| Will you be able to complete any mandatory training provided by your employer in the following subjects either before, or during the Care Certificate course? | Health and safety Yes [ ]  No [ ] GDPR Yes [ ]  No [ ] Fire Safety Yes [ ]  No [ ] Safeguarding Yes [ ]  No [ ] Manual Handling Yes [ ]  No [ ] Basic Practical Life Support Training (to meet UK Resuscitation Council Guidelines) Yes [ ]  No [ ]  |
| Do you have any concerns or questions about this course?Please give brief details here or speak to us at interview if preferred. | Yes [ ]  No [ ]  |
| **Free Writing task: (please handwrite this section)** Please tell us, using approximately 450-600 words **why** it’s important to promote person-centred values (such as: dignity, respect, privacy, choice, rights, , independence, partnership, equality and diversity ) and examples of **how** you do this in your day-to-day work---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------please attach more pages if needed |
| Date:  | Signature:  |

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