

Please complete this form using **BLOCK CAPITALS**

Defining Recruitment Excellence

1. Learner Details

Mr/Mrs/Ms/Miss/Other _____

Forename(s) _____

Surname _____

(Please ensure the above details match the names on the ID document you will provide at the exam centre)

Male Female Date of birth _____

Home address _____

Postcode _____

Home tel Code Number _____

Are you an IRP member or have you previously been an IRP member?

Yes No

Membership number _____

2. Employer Details

Company name _____

Job title _____

Company address _____

(ie where you are located)

Postcode _____

Work tel Code Number _____

Mobile number Code Number _____

Email address _____

(Please ensure this email address goes directly to the learner)

Is your current employer a corporate member of the REC?

Yes No

Membership number _____

Please send the course pack to

Home address Company address

3. Distance Learning Courses

OR

4. Fast Track Courses

We recommend 12 weeks of preparatory studying before the examination for distance learning.

For all fee information, please see our website www.rec-irp.uk.com

Distance Learning Courses commencing

14 November 2019 (examination on 6 February 2020)

13 February 2020 (examination on 7 May 2020)

14 May 2020 (examination on 6 August 2020)

13 August 2020 (examination on 5 November 2020)

Please indicate the preferred exam centre

- | | |
|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Belfast | <input type="checkbox"/> London |
| <input type="checkbox"/> Birmingham | <input type="checkbox"/> Manchester |
| <input type="checkbox"/> Bristol | <input type="checkbox"/> Nottingham |
| <input type="checkbox"/> Edinburgh | <input type="checkbox"/> Southampton |
| <input type="checkbox"/> Leeds | |

We recommend 5 weeks of preparatory studying before the examination for fast track.

Fast Track Courses commencing

4 - 6 February 2020

5 - 7 May 2020

4 - 6 August 2020

3 - 5 November 2020

Please indicate the preferred exam centre

- | | |
|-------------------------------------|---------------------------------|
| <input type="checkbox"/> Birmingham | <input type="checkbox"/> London |
| <input type="checkbox"/> Bristol | |
| <input type="checkbox"/> Edinburgh | <input type="checkbox"/> Leeds |

For office use only

Study Coach _____

Membership Number _____

Terms of Business – Employer

If the employer is paying the course fee, the person authorising the enrolment **MUST** complete the following section.

I, the undersigned, understand that full payment must be received with the enrolment and that once the course materials have been despatched and/or the course has commenced, that refunds/transfers cannot be granted.

All cancellations must be in writing. If a cancellation is received in writing before the course has commenced a refund may be applied for. Any successful refund will only be paid to the original payer and is not transferable.

Signature _____ Name (please print) _____

Position _____ Company name _____

The IRP is an equal opportunities provider, please contact us on 0207 009 2155 for more information.

Terms of Business – Learner

I, the undersigned, understand that full payment must be received with the enrolment and that I hereby make an application to become a Student Member of the IRP and agree to abide by the IRP Code of Ethics and Professional Conduct both in letter and spirit. Once the course materials have been despatched and/or the course has commenced, then I understand that refunds/transfers cannot be granted. If the exam is not taken at the end of the course but at a later date, a fee will apply.

Signature _____ Date _____

Employers often request that we send them their employees' results. We do not automatically do this but will send your results to your employer if they request that we do so. If you consent to your employer receiving your results please tick here

Payment Details

Please note that the payment is required with the enrolment form. Payment can be made by any of the methods listed below. Please tick as appropriate.

Total amount (including VAT) £ _____ (for all fee information, please see our website: www.rec-irp.uk.com)

Fee paid by Learner Employer

Cheque enclosed (please make cheques payable to 'REC')

Card details:

Visa Mastercard / Access Switch / Delta – Issue Number (Switch) _____

Name on card _____ Card number _____

Billing address _____

Valid from / / Expiry date / / Card security code (last 3 numbers on the back) _____

A receipt of invoice will be posted to the fee payer within 7 days of payment processing.

Please return this form to:

REC, IRP Learning
Dorset House, First Floor, 27-45 Stamford Street, London, SE1 9NT

Or email to: info@rec-irp.uk.com

t: 020 7009 2155 f: 020 7935 4112

www.rec-irp.uk.com/qualifications