

Candidate Eligibility Questionnaire

Level 6 Diploma in Occupational Health & Safety Practice

Please complete all sections of the below questionnaire before signing the declaration and returning this document to your course advisor.

I declare that the information provided in this document is, to the best of my knowledge true, I that I have read and understand SHEilds "[terms and conditions](#)" and agree to abide by them:

Signed:	
Date:	
You must supply an electronic copy of your official photographic ID with this document, failure to provide this will suspend your application.	

*Candidate Details	Please provide as much information about yourself as possible.
Title: (Mr / Mrs / Dr. / Etc.)	
First / Given Name:	
Surname / Family Name:	
Residential Address:	
Contact Telephone:	
Cell Telephone:	
Email:	
Date of Birth:	
Professional Qualifications:	
Professional Memberships:	
**UK Unique Learner Number:	

Employment Details	Information you provide during the completion of this qualification will be kept in the strictest confidence, in line with current data protection laws.
Company Name:	
Address:	
Country:	
Specific site location:	
***Site access restrictions:	
Current Job Title:	
Time in this position:	
Previous HSE experience:	

*Candidates name must match the names as stated in the photographic ID.

**UK candidates only, if you do not know your ULN it is accessible from the Learning Record Service, your course advisor will be able to assist you in this matter.

***Please list any site information which may make it difficult or impossible for our assessors to visit your workplace, such as an un hospitable environment (off shore/desert), or restricted access permission.

Eligibility Assessment	Y/N	Should you not be involved in the following, please expand on how you will be able to show your personal competence. We will use this information to assess whether your current position will provide a suitable environment for you to complete this qualification.
Will you be working to UK Legislation?		
Are you involved in policy writing?		
Do you investigate accidents?		
Do you undertake risk assessments?		
Do you evaluate Safety systems?		
Do you evaluate emergency response procedures?		
Do you audit health & safety management systems?		
Do you design HSE training?		
Do you deliver HSE training		
Are you able to obtain "Expert Witness" statements from a competent person?		

Expert Witness Details	An "Expert Witness" is a person who is ideally a member of IOSH as a Graduate or Chartered member, and who holds an equivalent or higher qualification to the one you are undertaking. The "Expert Witness" can provide witness evidence of tasks you have undertaken and professional discussions.
Title: (Mr / Mrs / Dr. / Etc.)	
First / Given Name:	
Surname / Family Name:	
Contact Telephone:	
Cell Telephone	
Email:	
Professional Qualifications:	
Professional Memberships:	