

Application to submit Practical Training Logbook for Technical Assessment 2018

Your practical training logbook and portfolio of evidence may be submitted for marking, at any time during the year, providing you have successfully completed your academic course and completed the 6 months training period.

Full Name	Dr/Mrs/Miss/Ms/Mr
Address (for correspondence)	
Email	
Daytime Tel No.	Candidate Reg No.

Which Logbook are you submitting? (please mark appropriate box with **X**)

<input type="checkbox"/>	Higher Certificate in Food Premises Inspection
<input type="checkbox"/>	Higher Certificate in Food Control
<input type="checkbox"/>	Ordinary Certificate in Food Premises Inspection
<input type="checkbox"/>	Diploma in Health & Safety at Work Enforcement
<input type="checkbox"/>	Diploma in Environmental Protection
<input type="checkbox"/>	Higher Certificate in Housing Practice

Have you successfully completed the accredited course? Yes <input type="checkbox"/> No <input type="checkbox"/>
Is this a re-assessment? Yes <input type="checkbox"/> No <input type="checkbox"/>

Please ensure you send the following along with this application form:

<input type="checkbox"/>	Logbook & Portfolio of Evidence
<input type="checkbox"/>	Is your cheque attached
<input type="checkbox"/>	Please tick the box if your portfolio includes material in Welsh.

(If your portfolio contains material in a language other than English or Welsh, an English translation must be provided)

Please send your logbook in a strong box, with lid, as it will be sent via post to an assessor. Do not send in plastic bags, suitcases or rucksacks.

PLEASE NOTE: Ensure that you retain a full copy of your logbook and portfolio of evidence

Signature Date

LOGBOOK ASSESSMENT FEE	
MEMBER	NON-MEMBER
£180.00	£205.00

Payment Information

You can send a cheque with this form (payable to CIEH) or, alternatively, if you wish to pay by credit/debit card (Maestro, Solo, Visa or Mastercard only), please give a day time number and our Admin Officer will contact you via telephone to take payment. Please note that your application will not be processed until payment is secured.

Day Time Telephone No. _____

Please note that this form will not be accepted without a valid EHRB registration number

PLEASE RETURN THIS FORM TO:

Membership & Education Department, CIEH, Chadwick Court, 15 Hatfields, London SE1 8DJ