



INTERNATIONAL COLLEGE FOR
PERSONAL & PROFESSIONAL DEVELOPMENT

ICPPD

PROFESSIONAL DIPLOMA in Expressive Arts Therapy

10-day (60 hour), part-time, professional programme

APPLICATION FORM

PERSONAL DETAILS*

Name (for Registration):
in block capitals

Address

Date of Birth: _____ Nationality: _____ PPS No. _____

Tel - Home: _____ Tel - Work: _____ Tel -
Mobile: _____

Email: _____

Current Employment: _____

Academic/Professional Qualification
(please attach a copy of certification): _____

Professional Membership
(Body/Number) if relevant: _____

Please attach a letter of introduction of no less than 250 words, clearly stating your desire to participate in this programme, and what you hope to achieve through its completion.

*For specific commencement dates and
delivery times refer to www.icppd.com*

Where did you hear about this course? _____

***NOTE:** ICPPD will use the information provided on this application form for the sole purpose of programme-related admission administration and communication. Information provided will be held securely in accordance with ICPPD's data protection policy.

I certify that the information provided on this application (and in my letter of introduction) is accurate. I understand that withholding information, or giving false information, may result in a refusal of a place within ICPPD or in termination of my application/registration at ICPPD.

Applicant Signature: _____ Date _____

PLEASE NOTE: Applications must be accompanied by a deposit of €350, which is credited against course fees (of €1,350) if the applicant is admitted onto the programme.

- Applicants are entitled to a full refund of this deposit if they decide to cancel within 7 days of receipt of their application. Should an application be unsuccessful, or cancelled by the applicant following this 7-day period, an administration fee of €100 is retained, and the balance of €250 is refunded to the applicant.
- Once an applicant accepts a place on the programme, any fees paid become subject to the ICPPD's Financial Terms & Conditions, which outlines the College's policies in relation to refunds, payment plan, etc. [ref www.icppd.com for more information]

OFFICE USE ONLY

Dep Rec'd: _____ ID No Assigned: _____