Programme member details form   
ICF Accreditation Preparation Programme

**Please fill out the details below in order that we can ensure your electronic record is correct and up-to-date and return the form to Executive Education by email using,** [**exec@henley.ac.uk**](mailto:exec@henley.ac.uk)**.**

If you have any questions or problems please contact the Executive Education team on exec@henley.ac.uk.

|  |  |
| --- | --- |
| Section 1 Programme details | |
|  | |
| Programme | ICF Accreditation Preparation Programme |
| Start date | July 2021 (21st – 22nd) |

|  |  |
| --- | --- |
| Section 2 Personal details | |
|  | |
| **2.1** Title (Mr/Mrs/Ms/Miss/other) |  |
| **2.2** Surname (Family name) |  |
| **2.3** Forenames (in full) |  |
| **2.4** Preferred forename |  |
| **2.5** Gender (male/female) |  |
| **2.6** Date of birth (dd/mm/yyyy) |  |
| **2.7** Disability (please state if you have any disability that may affect your learning) |  |

|  |  |
| --- | --- |
| Section 3 Nationality and Residence | |
|  | |
| **3.1** Nationality |  |
| **3.2** Country of birth |  |
| **3.3**  Country of permanent residence |  |
| **3.4** Ethnic origin (UK & EU only) |  |

|  |  |
| --- | --- |
| Section 4 Contact (correspondence) address details | |
|  | |
| **4.1** Contact address |  |
| **4.2**  Country |  |
| **4.3**  Postcode |  |
| **4.4** Telephone |  |
| **4.5** Mobile |  |
| **4.6** Email |  |

|  |  |
| --- | --- |
| Section 5 Employment | |
|  | |
| **5.1** Job title |  |
| **5.2**  Employer |  |
| **5.3** Office address |  |
| **5.4**  Country |  |
| **5.5**  Postcode |  |
| **5.6** Telephone |  |
| **5.7** Mobile |  |
| **5.8** Email |  |
| **5.9** Please describe your current duties |  |

|  |  |  |
| --- | --- | --- |
| Section 6 Invoicing details | | |
|  | | |
| **6.1** Who is paying fees? | Self | Company |
| If employer or company is paying fees, please provide billing details below | | |
| **6.2**  Employer/ Company name |  | |
| **6.3** Billing address |  | |
| **6.4**  Country |  | |
| **6.5**  Postcode |  | |
| **6.6** Telephone |  | |
| **6.7** Email |  | |
| **6.8** PO Number (if applicable) |  | |

|  |
| --- |
| Section 7 Education |

|  |  |  |
| --- | --- | --- |
| Please confirm that you have completed either the Professional Certificate in Coaching/ Executive Coaching or the PGCert/ PGDip/ MSc Coaching and Behavioural Change | The PCIC  The PCEC  The PG Cert CBC  The PG Dip CBC  The MSc CBC |  |
| Please confirm which intake of the above you attended |  | |

|  |
| --- |
| Section 8 Declaration |

I declare that the information given on this form is true, complete and accurate and that no information requested,   
or other material, has been omitted.

|  |  |
| --- | --- |
| Signature |  |
| Date |  |

**Note:** If any information on your application form is found to be false, it may lead to the withdrawal of your place at the University.

Please note: The personal information you supplied will be used to help us respond to your request, for quality assurance and for data analytics purposes. Your personal data will not be sold to any organisation, and will not be shared with any organisations outside the University of Reading apart from those that help us to provide this service or unless required by law. The information that has been provided in this form will be treated in accordance with the General Data Protection Regulation (2016), the UK Data Protection Act 2018 and all applicable Data Protection laws. Please refer to the University of Reading at (www.reading.ac.uk/15/about/about-privacy.aspx) for more information.