



INTERNATIONAL DIPLOMA COURSES APPLICATION FORM

Confidential

Please type this form or complete it using block capital letters. Please read guidance notes before completing this application form.

1. Which course are you applying for?

Please tick appropriate box and specify year of course

- | | | |
|--------------------------|-------------------------------|-------|
| <input type="checkbox"/> | Botanic Garden Management | year: |
| <input type="checkbox"/> | Plant Conservation Strategies | year: |
| <input type="checkbox"/> | Herbarium Techniques | year: |
| <input type="checkbox"/> | Botanic Garden Education | year: |

2. Personal details

Family name:

First or given name:

Title (Dr Mr Mrs Miss Ms etc):

Date of birth:

Nationality:

Male/Female*

* please delete as applicable

Please attach
passport-sized photograph

Postal address (including name and title):

Email address:

Phone number:

Fax number:

3. Training and qualifications

Please give details of any educational or professional training and qualifications you have undertaken since leaving school, including dates and organisations

Date	Course title	Organisation	Qualification

Proficiency in English:

The course will be taught and assessed in English; please indicate your proficiency in English by ticking the appropriate box

- English is my first language
- I have received English language training (please give details of training or qualifications and supply photocopies of certificates)

4. Current employment details

Name of employer:

Full postal address of employer:

Email address:

Phone number:

Fax number:

Position or job title:

Years in current position:

Brief job description:

5. Funding details

Please tick appropriate box

- I have private funding
- I have sponsorship from:
(please give details and supply written confirmation from the funding organisation)
- I have applied for sponsorship from:
(please give details)
- I do not have sponsorship at present, but I am searching for possible sponsors

6. How did you hear about this course?

Please tick appropriate box

- Specialist publication (state title)
- RBG Kew website
- Website (state title)
- Personal recommendation from colleague
- BGCI website
- BGCI publication
- Other (please give details)

7. Your (handwritten) signature

Please sign and date your application below

Signature:

Date:

8. Employer's endorsement

Please ensure that your application is endorsed by the Director of your institution or your Head of Department

I fully support and endorse this application.

Signature:

Date:

Name:

Position within organisation:

Please attach to your application form:

- A copy of your curriculum vitae
- A letter giving your reasons for applying for this course. Please include details of how this course relates to your current or future work and which skills/knowledge you hope to gain from the course.
- A recent passport-sized photo of yourself
- Details of English language qualifications if appropriate and copies of certificates

Please send your completed form to:

Dr Pat Griggs
International Diploma in Botanic Garden Education
RBG Kew
Richmond
Surrey
TW9 3AB
Tel: +44 (0)20 8332 5625

Email: P.Griggs@kew.org

Forms should arrive at least 3 months before the start date of the course you wish to attend.

We cannot accept emailed forms without a formal endorsement by your Director or Head of Department.

We will confirm receipt of your form by email

For office use only	
Application received	Acknowledgement sent
Result of application	Confirmation sent