



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

HSE Dublin Mid-Leinster
Regional Centre of Nursing & Midwifery Education
Midland Regional Hospital
Tullamore
Co. Offaly
Tel: (057) 9358752
Fax: (057) 9358757

Programme Application Form
(Complete in full)

| | |
|--|---|
| Programme Title: Certificate in Application of Mental Health Legislation to Practice | |
| Full Name: (Please print as per Professional Registration) | |
| Email Address: (Mandatory) | Mobile Telephone Number: (Mandatory) |
| Professional Qualifications: | Professional Registration Body |
| | Professional Registration Number: (as applicable) |
| Position: | |
| Work Address: (in full) | |
| Work Number: | |
| Line Manager: | |
| Signature: | Date: |
| Return: To: | Fully completed and signed application form Programme Co-ordinator, Certificate in Application of Mental Health Legislation to Practice, Regional Centre of Nursing & Midwifery Education, Midland Regional Hospital, Tullamore, Co. Offaly |
| OR Fax to 057 9358757 (check that fax has been received) Closing date for receipt of <u>fully completed and signed Application Form Friday 25th July 2014.</u> | |

For office use only

Fully completed and signed application form