

APPLICATION FORM | QUALIFICATION



Acceptance onto the requested programme is subject to a satisfactory induction taking place, which confirms the level and course is right for you.

Name of qualification: _____

Your details:

Title: _____ Forename: _____ Surname: _____

Address: _____

Postcode: _____ Date of birth: _____

Email: _____ Telephone number: _____

I'd like to receive the IOG monthly e-newsletter and industry news

Learning needs?

Please indicate if there are any learning barriers which may affect your learning experience: (e.g. dyslexia or other learning needs, limited access to the Internet, or time limitations due to work/home life commitments)

IOG membership:

Please tick the relevant box:

I am a member of the IOG I am not a member of the IOG I am interested in IOG membership

Course induction information:

Please tick all boxes that apply:

I have a keen interest in maintenance of turfgrass I have regular access to email
 It is my own decision to enrol myself onto this course I can commit to at least 5 hours of study per week
 It is my employer's decision to enrol myself I can attend an exam outside of my normal routine

Years of practical experience you have in maintaining or managing turfgrass surfaces: _____

Please indicate the highest qualification level that you have achieved in a horticulture or turf related subject:

I don't currently have one Level 1 Level 2 Level 3 Level 4 Level 5+

Please indicate the last time you carried out any formal study for a qualification:

Within the last 3 years Within the last 4 to 6 years 7 or more years

This is a roll on roll off programme. Please state your proposed start date: _____

Please indicate your method of payment: Credit/debit card Invoice

Please provide a short statement explaining why you wish to study this course and what your future career aspirations are:
