Please submit this form as an email attachment to **ubstraining@admin.cam.ac.uk**.

You will receive a confirmatory email when a place on the course is reserved.

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| --- |
| **Purchase order number OR group name if claiming your group’s free place:** |
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| **Name as you would like it to appear on your certificate:** |
|  |

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| --- |
| **Email address (and raven ID if applicable):** This will provide access to online resources. |
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| **Preferred course date:** |
|  |

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| **Which UBS animal facility do you work in?** |
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| --- |
| Please indicate if you have any disabilities or challenges we should be aware of: |
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| **Please give a brief description of your experience including any species you have worked with and current species:** |
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| **Do you have any experience with DOPS assessments within your facility? Please include if you are aware of other assessors within your establishment:** |
|  |

**Group leader/ PPL holder approval**

I support this individual in undertaking the Assessors Course and confirm that they are a suitable person to assess within the group, and will have the time and expertise to do so.

I understand that only one free place is available per group and payment will be required for any further group members.

|  |  |
| --- | --- |
| **Group leader / PPLh name:**  | **Job title:** |
|  |  |
| **Signature:** |
|  |