L5 Diploma in Practitioner Reflexology Application Form | Page 1

Once you have read the prospectus, please complete this confidential application form and email it to learn@templeacademyreflexology.com thank you.

On receipt of the completed document we will contact you to arrange an interview via Zoom.

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| --- | --- | --- | --- |
| **Name** |  | **Email** |  |
| **Address** |  | **Mobile** |  |
|  | **Postcode** |  |
|  |
| **Occupation** |  | Full Time | Part Time |
| **Current studies** |  |
|  |
| **Where did you hear about the course?**  |  IRC | AoR | Google search | social media | word of mouth | other |
|  |
| **Qualifications and training, including dates** |
|  |
|  |
| **Please indicate your preferred day and time for a Zoom call** |
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|  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed** |  | **Date** |  |

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