**APPLICATION FORM FOR RECOGNITION**

**OF**

**NON-CREDIT BEARING SHORT COURSES**

1. **DETAILS OF THE Education and Training Provider (ETP)**

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| **1.1 Name of ETP: …………………………………………………………………………………** |
| **1.2 Type of ETP** *(****Tick (* ✓*) the appropriate box)*** | **Conventional** | **Workplace** | **Consultant** |
|  |  |  |
| **1.3 Accreditation no.: …………………………..** | **1.4 Expiry date: …….……………..……** |
| **1.5 Physical address: ……………………………………………………………..………..….…** |
| **1.6 Contact person: …………….………..……..** | **1.7 Tel. Number: …………….……..…..** |
| **1.8 Designation: ………………………..……….** | **1.9 Signature: ………………………….** |
| **1.10 Application submission date: ………………………………………….……………...** |

1. **SCOPE OF ACCREDITATION**

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| **2.1 ETP Accreditation Number: ………..………** | **2.2 Expiry Date: ……………………………..** |
| **2.3 Fields** | **2.4 Fields of Learning Accredited** | **2.5 Level** |
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1. **TRAINING NEEDS ASSESSMENT**

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| **3.1 Rationale/Purpose: (Derived from skills needs analysis)****…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………** |
| 3.2 Skills Needs Analysis Report (Provide report with attached evidence of labour market survey or record of stakeholders’ engagements. Proof of alignment to national skills priorities, where applicable).**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………** |

1. **SHORT COURSE GENERAL INFORMATION**

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| **4.1 Title of Short Course:** | **……………………………………………………………………...** |
| **4.2 Type of Short Course*****Tick (* ✓*) the appropriate box)*** | **Technical** | **Generic** |
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| **4.2 Field of Learning:**  | **……………………………………………………………………..** |
| **4.3 Course Learning Time (In hours):** | **…………………………………………** |
| **4.4 Duration - Month and Year Developed:** | **………………….…….** | **Year Due for Review:** | **…………………** |
| **4.5 Target Population:** | **………………………………………………………………………****………………………………………………………………………** |
| **4.6 Entry Requirements:** | **………………………………………………………………………****………………………………………………………………………** |

1. **COURSE CONTENT DELIVERY STRATEGIES (Refer to the points outlined in the guidelines on this criterion)**

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| **5.1 Exit Level Outcomes:****i. ……………………………………………………………………………………………………….****ii. ………………………………………………………………………………………………………****iii. ……………………………………………………………………………………………………..** |
| **5.2 Learning Outcomes****i. ……………………………………………………………………………………………………….****ii. ………………………………………………………………………………………………………****iii. ……………………………………………………………………………………………………..** |

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| **5.2.1 Learning Outcome (LO) 1****……………………………………………………………………………………………………….** |
| **Topics/Unit** | **Specific LOs *(Objectives)*** | **Delivery strategies** | **Assessment Strategies** |
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| **5.2.2 Learning Outcome (LO) 2: ……………………………………………………………** |
| **Topics/Unit** | **Specific LOs *(Objectives)*** | **Delivery strategies** | **Assessment Strategies** |
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| * 1. **Short Course**

 **Delivery Modes** *(****Tick (* ✓*) the appropriate boxes):*** | **Fulltime** | **Part-time** | **Online** |
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| * 1. **Key Facilitation/Learning strategies (general statement about the strategies or methods to be employed in the delivery of the programme)**

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| **5.5 Course Delivery Schedule** |
| **Date** | **Topic/Unit** | **Notional Learning Hours** |
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| **6. ASSESSMENT AND CERTIFICATION**

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| **6.1 Assessment** **(Provide assessment strategies to show how achieved competencies will be measured against the exit level outcomes).** ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| **6.2 Certification (Provide Certification Requirements, including illegibility, type of certificate, and a sample certificate with key safety features).**……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |

1. **RESOURCES**

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| **(List facilities, equipment and prescribed textbooks including minimum staff qualifications to facilitate delivery and assessment of the course).****……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………** |

1. **THIRD PARTY ARRANGEMENT (Where applicable)**

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| **Provide evidence of contractual obligation, nature of collaboration, evidence of accreditation of third party and** **roles and responsibilities of each party in regard to delivery, assessment and certification****……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………** |

1. **SHORT COURSES ENDORSEMENT**

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| **Confirmation reports from Professional Bodies, Associations or Regulators on the relevancy of the Course to the labour market skills needs.****………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………** |

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| 1. **DECLARATION**
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| We the undersigned state that;* the information contained in the application is, to the best of our knowledge, true and accurate.
* Our institution has capacity to cover its course delivery operations.
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| Name of Management Representative | Surname: …………………….  | Name: ………………………. |
| Signature: ……………………  | Date: ………………..………. |
| Witness (Name of one member of Board of Governors or Management. | Surname: …………………….  | Name: …………………….... |
| Signature: ……………………  | Date: ………………..………. |

1. **APPLICATION CHECKLIST**

This application and its attachments have been checked and found to contains information in all of the following criteria *(****Tick (* ✓*) the appropriate boxes):***

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| **Application** **Criteria** | **Applicant** | ***HRDC*** |
| **C1. Accreditation**Attach copy of accreditation certificate and scope of accreditation as proof of ETP Accreditation with accreditation authority. |  |  |
| ***C2. Training Needs Assessment***Skills needs report as evidence that the short course meets the operational competency needs. Record of stakeholder engagement. Proof of alignment to national skills priorities, where applicable |  |  |
| ***C3. Short******Course******General******Information***Provide: Title, learning field, duration of course, date course developed and date of review |  |  |
| ***C4. Course******content******and******delivery***Short Course Guide showing Exit Level Outcomes, Learning outcomes, Objectives, delivery strategies, Course Outline/Delivery Schedule. |  |  |
| ***C5****.* ***Assessment******and******Certification***Provide assessment strategies to show how achieved competencies will be measured against the exit level outcomes. Provide Certification Requirements including illegibility, type of certificate, and a sample certificate with key safety features). |  |  |
| ***C6. Resources***List of facilities, equipment, teaching resources prescribed textbooks and minimum staff qualifications to facilitate delivery and assessment of the course*.* |  |  |
| ***C7. Third******Party******arrangements******(******where******applicable)***Memorandum of Agreement with dates and obligations of both parties, copies of license; evidence of recognition/accreditation of the third party in country of origin. |  |  |
| ***C8. Course Endorsement***Letters of confirmation from Professional/Regulatory Bodies that competencies from such courses will be recognized. |  |  |
|  | ***Date*** | ***Date*** |
| ***Sign*** | ***Sign*** |

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