## **Meitheal Training Application Form**

Tel: 01 - 8212171 - 087 7756924 email: info@meitheal.ie www.meitheal.ie

## **Application Process**

- 1. Complete the Meitheal application form
- 2. Return with full fees as soon as possible to our postal address Meitheal, 37B Main Street, Ongar Village, Dublin 15.
  Training courses will take place in Dublin city centre
- 3. Due to the demand for our courses, places will only be confirmed on receipt of full payment

Booking Details						
Course No:	Course Fee:					
Name:						
Address:				<del></del>		<del></del>
Tel: (Work)		(Mobil	le)	<del> </del>		
Email:	<del></del>	<del> </del>	<del> </del>	_		
Name of Organis	ation:		<del></del>	<del></del>		_
<b>Sector:</b> ( <i>Please ti</i> Community/Volunt	•	FAS Project Pa	articipant [	] Sta	tutory	[ ]
Job Title:						
Staff [ ]	Volu	ınteer [ ]	Со	mmittee I	Membe	er[]
J.I. or C.E. Worker	r[]	Other:				
Please indicate if any special require	-					

## Please answer the following questions as fully as you can as we make our selection based on the information provided

1.	Give details of any previous training you have completed in the topic covered by the course you have selected						
2.	What do you hope to gain from	n this training?					
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3.	How did you hear about our tra	aining?					
Co	ommunity Exchange	[ ]					
W	ord of mouth	[ ]					

Meitheal email	[ ]	
Other please specify		