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**Appendix 1**

**INVITATION TO TENDER – Trauma Education Facilitators**

**Community based courses/ workshops and courses Accredited by Open Learning, Queen’s University, Belfast**

 **PERSONAL DETAILS**

|  |  |
| --- | --- |
| **Title: Mr/Mrs/Ms/Miss** Mr | **Full Name:** |
| **Address for Correspondence:** |
|  |
| **Postcode:** | **Email Address:** |
| **Daytime Telephone No:** | **Evening Telephone NI:** |

#### **UNIVERSITY/HIGHER EDUCATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject & Awarding Body****(please name institute)** | **Level Attained Certificate, Diploma, Degree etc** | **Grade Obtained** | **Year Obtained** |
|  | Choose an item. |  | Choose an item. |
| **MEMBERSHIP OF/REGISTRATION WITH PROFESSIONAL BODIES****Name of Professional Body****(e.g. NISCC, CIPD, CIMA, BACP etc)** | **Membership/Registration Number & Level of Membership** | **Date Joined/****Renewal Date (if applicable)** |
|  |  | Click here to enter a date. |

*\*In order to demonstrate that you meet the eligibility criteria please provide evidence of your qualification by attaching a copy*

 *of your certificate and accreditation document.*

***Please provide practical relevant examples where relevant.***

|  |
| --- |
| Education to Degree Level 6 (or equivalent) in Psychology, Counselling, Psychotherapy Social Work, Community Development, Trauma Studies, Nursing, Substance USE /Addictions or an equivalent, relevant area of study. |
| Demonstrate how you meet two years’ experience of working in the area of trauma. |
| Demonstrate how you meet two years’ experience delivering education programmes to adults in either a community, further education and/or organisational setting.  |
| Ability to be responsive to a range of learning styles and abilities. |
| Demonstrable IT skills, including the obligatory use of PowerPoint and willingness to use MS Word, for online marking and communication with the course administrator Outlook or equivalent software. Access to a laptop is essential for teaching purposes.  |
| Hourly rate of providing the training including travel and all associated costs |

**Please Note:**

We are required by the Data Protection Act 1998 (GDPR) to inform you how we will use any personal information that we hold either manually or on computer in relation to this submission and any subsequent period of procurement.

This submission and any additional information you provide will be held confidentially and in accordance with GDPR.

### PERSONAL STATEMENT

### I declare that the information I have provided in this submission is, to the best of my knowledge accurate. I understand that the provision of false or misleading information in connection with my submission or the omission of relevant information may result in rejection of my submission application, or instant termination of my services. I authorise WAVE to process any personal data given on any part of this form.

Signed:

Date: Click here to enter a date.

Name (in capitals):

