**Application for IBMS training portfolio for the Certificate of Achievement Part I & II**

The laboratory manager or training officer is responsible for placing the order. Please complete in full and return via email or post to the address shown at the bottom of this form.

Please indicate which portfolio the application is for.

|  |  |  |  |
| --- | --- | --- | --- |
| Part I |  | Part II |  |

For All applications:

|  |  |
| --- | --- |
|  | The laboratory where the training will take place is approved by the Institute of Biomedical Science for support staff training. |
|  | **Payment**  Payment must be made via either of the following methods:  Cheque/Postal Order (must be attached to this form or application will be returned);  Card payment (details of how to make a payment by card will be provided once the application has been screened);  Purchase Order - a separate document detailing the following information:   * Purchase Order number * Order details * Invoice address   Quoting the Purchase Order number alone is insufficient. |

For Part II applications please include the following additional items:

|  |  |
| --- | --- |
|  | Candidate applying for Part II must be current IBMS members. (Associate membership is suitable)  **Please note that current, paid membership must be maintained for the duration of this qualification.** |
|  | If part I has not been completed please include evidence of level 3 (Scotland level 6) qualifications in a relevant subject. |
|  | If part I has not been completed please include a statement outlining the candidate’s scope of practice for evaluation. |

**Candidate Details**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Surname: |  | Title: |  | |
| Forename(s): |  | | | |
| Date of Birth: |  | IBMS Number: | |  |
| E-mail Address: | | Telephone No: | | |
| Home Address: |  | | | |
|  | | | |

**Laboratory Details**

|  |  |  |  |
| --- | --- | --- | --- |
| Approved Laboratory: |  | | |
| UKAS Ref (if applicable): |  | | |
| Hospital |  | | |
| Organisation: |  | | |
| Laboratory Address: |  | | |
|  | Postcode: |  |

## Training Officer Contact Details\*

\* The Institute defines a training officer for the purposes of completing the portfolio, as the individual whose responsibility it is to ensure that the delivery of training, assessment of competence, and verification of knowledge and skill against each individual statement is signed off.

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: |  | Title: |  |
| Forename(s): |  | HCPC No: |  |
| IBMS No: |  | Telephone No: |  |
| Email Address: |  | | |

## Laboratory Manager Contact Details

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: |  | Title: |  |
| Forename(s): |  | HCPC No: |  |
| IBMS No: |  | Telephone No: |  |
| Email Address: |  | | |

**Payment Details**

Trainee portfolios are priced at £133 (this includes portfolio, and administration fees).

**Payment by Cheque or Postal Order:**

Cheques or Postal Orders should be made payable to ‘IBMS’.

|  |  |
| --- | --- |
| Cheque enclosed for: | £133 trainee copy  £32 replacement copy  £62 swap copy |

**Card Payment:**

|  |  |
| --- | --- |
| Card payment to be made for: | £133 trainee copy  £32 replacement copy  £62 swap copy |

We will email you with details of how to make a payment by card once the application is approved.

**Invoice Details:**

**A separate Purchase Order is mandatory and must be attached to the portfolio order form** where you choose the option to raise an invoice. If a Purchase Order is not attached, the order form will be returned to the laboratory training contact.

Please note that if we receive a Purchase Order independently of an order form, we will be unable to match it with any subsequent order form unless the Purchase Order number is stated clearly below.

|  |  |
| --- | --- |
| Purchase Order number: |  |
| Invoice for: | £133 trainee copy  £32 replacement copy  £62 swap copy |

**Delivery Address\***

\* Portfolios will be issued to the training officer. Please provide an address below, only if it differs from the address given previously for the candidate’s laboratory.

In providing IBMS with the information requested you are consenting to its use as indicated in the IBMS Privacy Notice. Further information can be found on the IBMS website at <https://www.ibms.org/privacy/>