**Course Application (Vision Impairment)**

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| **Please complete (scan if needed) and return to:** [courses-sensory@bradford.gov.uk](mailto:courses-sensory@bradford.gov.uk) | | | | |
| Please indicate your choice below | | | | | | |
| **EARLY YEARS’ SETTINGS** | | | | | | |
| **The following courses are to be delivered in settings and dates are to be negotiated. Costs are whole course costs. Travelling costs are also to be added on.** | | | | | | |
| Cerebral Visual Impairment (CVI) | | | | | £120 | |
| Common Eye Conditions | | | | | £120 | |
| Developing Vision | | | | | £120 | |
| Getting Glasses On | | | | | £120 | |
| Including the pupil with Vision Impairment in Early Years’ settings | | | | | £130 | |
| **The following courses are to be delivered at MMT. Costs are per person.** | | | | | | |
| Including a child with Down’s Syndrome and vision impairment in your Early Years and Primary Classroom – 26.09.17 | | | | | £35 | |
| Supporting an Early Years Child with a Vision Impairment – 06.10.17 | | | | | £110 | |
| **PRIMARY AND SECONDARY SCHOOL SETTINGS** | | | | | | |
| **The following courses are to be delivered in schools and dates are to be negotiated. Costs are whole course costs. Travelling costs are also to be added on.** | | | | | | |
| Briefing – Exam Access Arrangements for VI Learners | | | | | £130 | |
| VI Peer Awareness | | | | | £250 | |
| **The following courses are to be delivered in various locations. Costs are per person.** | | | | | | |
| Vision Friendly Schools – *dates/times to be confirmed* | | | | | £275\* | |
| Including a child with Down’s Syndrome and vision impairment in your Early Years and Primary Classroom – 26.09.17 | | | | | £35 | |
| *\*costs for individual sessions can be catered for* | | | | | | |
| **SPECIAL SCHOOL SETTINGS** | | | | | | |
| **The following courses are to be delivered in schools and dates are to be negotiated. Costs are whole course costs. Travelling costs are also to be added on.** | | | | | | |
| Cerebral Visual Impairment (CVI) | | | | | £120 | |
| Common Eye Conditions | | | | | £120 | |
| Developing Vision | | | | | £120 | |
| Getting Glasses On | | | | | £120 | |
| **HABILITATION COURSES** | | | | | | |
| **The following courses are to be delivered in various locations. Costs are per person.** | | | | | | |
| Supporting a pupil with Vision Impairment with mobility – 18.09.17 | | | | | £50 | |
| Supporting a pupil with Vision Impairment with orientation and independence – 11.10.17 | | | | | £50 | |
| Supporting a pupil with Vision Impairment with orientation and independence – 06.11.17 | | | | | £50 | |
| Supporting a pupil with Vision Impairment who uses a long cane – 20.11.17 | | | | | £55 | |
| Supporting a pupil with Vision Impairment who uses a long cane – 15.01.18 | | | | | £55 | |
| Supporting a child with Vision Impairment in an Early Years’ Setting (mobility) – 29.01.18 | | | | | £105 | |
| Supporting a child with Vision Impairment in an Early Years’ Setting (mobility) – 31.01.18 | | | | | £105 | |
| Supporting a pupil with Vision Impairment with mobility – 05.02.18 | | | | | £50 | |
| continued over…..  **Please type in the boxes provided / indicate choices as required::** | | | | | | |
| **Delegate name** | |  | | | | |
| **Delegate** **post title** | |  | | | | |
| **School/establishment name**, **address** including **postcode** | | (this is where the invoice will be sent to) | | | | |
| School telephone number | | |  | | | |
| **Delegate’s school email address:**  **(to confirm registration/main correspondence)** | | |  | | | |
| **Delegate’s** **mobile number:**  **(to contact you in case of emergency)** | | |  | | | |
| **Refreshments:** All food is buffet style, hot and cold drinks are provided. (Preferences and dislikes cannot be catered for). | | | **Dietary Requirements:** VegetarianDiabetic  Othersuch as food allergy or intolerance  **Special requirements:** Please tell us if you have any other special requirements other than dietary | | | |
| **Authorised School Signature or email from Business Manager, Head /SLT**  Email will be taken as confirmation your school accepts the costs and terms below: | | | | *Sign here if not emailing* | | |
| **Acceptance terms:** Places will be allocated on a first come first served basis and your acceptance will be confirmed to you in writing via the email given on this form.  **Cancellation terms:**   * These terms are for all types of cancellation reasons. All of which must be sent to us via email. * No shows and 24 hour cancellations will be charged at full cost * 2 days to 4 days’ notice will incur a charge of 50% of the full cost * 5 days to 13 days’ notice will incur a charge of 25% of the full cost * Cancellations received 14 days or more before the start will not be charged unless stated in the course advert.   **Invoice terms:** This course will be invoiced directly to your school/organisation.  **Private bookings** can be accepted but must be paid in full two weeks before the start of the course. | | | | | | |