
# Chartered Educational Assessor Programme Application Form

By applying for this Programme, I agree to participate and pay the Programme fee

|  |
| --- |
| **Applicant Details**  |
| Name  |  |
| Current role  |  |
| Email Address  |  |
| Address  |  |
| CIEA Member  | Y / N  |

##  Programme Details

*Please tick the Course you wish to participate in:*

|  |  |  |  |
| --- | --- | --- | --- |
| **Stage 1** Certificate in Educational Assessment  | Date Attending Enter Date | £350  | Y / N  |
| **Stage 2** Diploma in Educational Assessment  | Date Attending  Enter Date | £750  | Y / N  |
| **Stage 3** Chartered Educational Assessor Assignment  | Date To be confirmed on Applicant Approval  | £350  | Y / N  |
| **Stage 1, 2 and 3** Certificate, Diploma, Chartered Educational Assessor  | Date Attending Enter Date  | £1195  | Y / N  |

Charity No.1122014

Page **1** of **5**

*Please complete this section for The Certificate*

*or*

*The Full Chartered Educational Assessor Course (CEA)*

We appreciate that in certain circumstances applicants may have sufficient knowledge, understanding and experience in assessment to warrant an exemption from Stage 1 of the CEA Programme, The Certificate in Educational Assessment. Please contact us at administratorciea@herts.ac.uk to apply for an exemption form.

|  |
| --- |
| **Work Experience**  |
| Please write a brief description of your current employment situation, to include your role and responsibilities. Please attach your current CV when sending your application.  |
|  |

*Please complete this section for all Courses*

|  |
| --- |
| **Assessment Experience**  |
| Provide a reflection, no longer than 500 words, detailing your experience which you believe would make you eligible to become a Chartered Educational Assessor. Please use the CIEA Professional framework below to support your reflection.  |
|  |



|  |
| --- |
| *Invoice Details*  |
| ***Please complete details of your organisation and finance department or your own personal details if you are self-funding your course.***  |
| Customer's full legal name  |  |
| *NB: If a Limited Company please also provide official letterhead of company showing company name, number and registered office address*  |
| Customer's full postal address  | FAO : Accounts Payable  |
| Address line 1  |  |
| Address line 2  |  |
| Address line 3  |  |
| City  |  |
| County  |  |
| Post Code  |  |
| Country  |  |
| Accounts Payable telephone number  |  |
| Accounts Payable e-mail address  |  |
| VAT Reg No. (EU customers only)  |  |
| UK, EU or overseas sales?  |  |
| Purchase Order Number  |  |
| *Please add a Purchase Order number if your organisation requires this to be quoted on the invoice. The purchase order should be emailed to* ***administratorciea@herts.ac.uk***  |
| If customer is a company is it an SME?  |  |
| *CHECK LIST*  |  |
| 1) Completed Personal Details for all Programmes | Y / N  |
| 2) Completed Work Experience, for the Certificate or CEA | Y / N  |
| 3) Attached current CV, for Certificate or CEA | Y / N  |
| 4) Attached Exemption form for Certificate, if required | Y / N  |
| 5) Completed Assessment Experience for all Programmes | Y / N  |
| 6) Completed Invoicing Details, for all Programmes | Y / N  |
| *On completion of this form please email to:* [*administratorciea@herts.ac.uk*](https://herts365.sharepoint.com/sites/CIEATraining/Shared%20Documents/CEA%20Standard%20Documents/administratorciea%40herts.ac.uk)  |  |

### FOR OFFICE USE ONLY

|  |  |
| --- | --- |
| Application Form Received  | Enter date  |
| Date Approved  | Enter date  |