

The British Occupational Hygiene Society

Faculty of Occupational Hygiene

APPLICATION FORM:
Proficiency Module Written Examination (as an external candidate)

Personal Details: (address for correspondence)

Surname:	(Mr/Mrs/Dr/Miss/Ms)
Forenames:	
Address:	
	Postcode:
Daytime Telephone:	
Email Address:	
Date of Birth: / / (dd/mm/yy)

Note: Candidates with special needs (eg dyslexia/reading/writing difficulties)

If we do not already hold your Certificate of Assessment please send it to the address below for our approval. Please be aware that this procedure may take up to 4 weeks and you will not be entitled to any special consideration in the written exam until this procedure has been completed.

If we already hold and have approved your Certificate of Assessment, please tick this box

Present Employment Details:

Company:	
Post held:	
Duties:	

Qualifications:

GCSEs:	Other:

Written Module Applied For:

Module Name	
1 st Choice Examination Date:*	
1 st Choice Examination Venue:	
2 nd Choice Examination Date:*	
2 nd Choice Examination Venue:	

*** minimum of 4 weeks notice required**

Candidates who wish to sit or re-sit the practical part of a Proficiency Module examination must apply directly through the Course Provider.

Other information:

Is this a re-sit examination?	Yes/No	If yes please give details	
Examination Venue:		Examination Date:	

Please send completed application form together with a cheque for the appropriate fee (payable to "BOHS") to the address below.

5/6 Melbourne Business Court, Millennium Way, Pride Park, Derby DE24 8LZ
 Tel: 01332 298101 Fax: 01332 298099 E.mail: admin@bohs.org

A Company Limited by Guarantee – Registered in England No. 2350348 – Registered Charity No.801417