



**Accredited Prior Learning (APL) / Accredited Prior
Experiential Learning (APEL) Application Form**

Name:.....

Address:.....

.....

Post Code:.....

Email

Please indicate which Coaching / Qualification or Endorsement you are seeking to gain accredited prior learning / award against.

Are you a BCU member Yes / No / So on BCU No.....

Is membership with: (please specify).....

Do you hold a current Coaching Qualification Yes / No.....

Do you hold a coaching certificate from the BCU or other.....

If yes to the above please give details.....

Do you have equivalent and verifiable experience in areas similar to those required in the level of award you are seeking APL against? If so please provide an outline below along with copies of any certification held providing referenced photocopied evidence as available...

Please list any additional experience you have and would wish to be considered as part of this application. Where possible please also provide any supporting evidence held, providing referenced photocopied evidence if available...

Are you currently paddling canoes / No. If

Are you currently coaching canoes.

If 'no' when where you last have coached with

If 'yes' at what level and in what capacity are you currently coaching

Please provide the names and contact details of two referees who would be willing to verify your experience as detailed above. At least one of the referees should be a current BCU Coach Educator (or equivalent) and able to testify to your experience as a paddlesport coach.

NAME	NAME
Address	Address
Postcode	Postcode
Email	Email
BCU No (if applicable)	BCU No (if applicable)

DECLARATION

- 1 I am aware of and have read the 'Physical Competence' requirements. I do not currently have any physical condition which might impair my ability to function effectively as a coach/instructor of canoeing. I agree to inform the Coaching of the BCU should I at some future time suffer any significant physical condition or debilitating illness or condition which might impair my ability in that role.
- 2 I do not have a criminal record or any other offences against the people, and agree to the BCU/CANI/SCA/WCA and other relevant Regulatory Bodies. I also agree to notify the above if I gain a criminal record or any other offences against the people.
- 3 I understand that the prerequisites relevant to the level being taken should be in place at the time of assessment and that it should be maintained during training/practicing as a coach.
4. I confirm that the information provided is true and accurate to the best of my knowledge and experience.

By signing this application, you are deemed to understand and accept all of the foregoing. I confirm that this application has been completed honestly and accurately:

Signature of applicant

Date

Name

Please return this registration form to **The BCU Awarding Body APL / APEL Officer, 18 Market Place, Bingham, Nottingham, NG13 8AP.**