1. Course Details

Course Name: __________________________________________

Funding Source*: ☐ SICAP funded 100% ☐ Mainly/Half funded by SICAP
☐ Less than Half funded by SICAP ☐ 100% funded by Others

Start Date*: ______/_______/20____ End Date*: ______/_______/20____

Number of Hours per Week:* ___________ Venue: ______________________________

Provider*:
☐ C/V sector Org. ☐ ETB ☐ Higher Education Institute ☐ Institute of Technology
☐ Private Provider ☐ LDC ☐ Skillnets ☐ SOLAS
☐ Other, please specify:

Course Type*: Select one of the 3 options and complete related fields

☐ (1) Accredited certification ☐ (2) Industry certified ☐ (3) No accreditation

(1) NFQ Level*: ______________ (levels 01 to 10)

(1) & (2) Awarding Body*: (Select one option)

☐ DES ☐ DIT ☐ Institutes of Technology
☐ Professional body ☐ QQI ☐ Universities

* If Awarding body = QQI you must specify QQI programme code

(1) Award Level*: ☐ Major ☐ Minor ☐ Special Purpose

(1) Education Sector*: (see http://unesdoc.unesco.org/images/0023/002350/235049e.pdf for further details)

☐ Agriculture, forestry, fisheries and veterinary ☐ Health and welfare
☐ Arts and humanities ☐ ICT
☐ Business, administration and law ☐ Natural sciences, mathematics and statistics
☐ Education ☐ Services
☐ Engineering, manufacturing and construction ☐ Social sciences, journalism and information
☐ Generic Programmes

(2) Industrial/Professional Sector*: (select one option)

☐ Business & Accounting ☐ Construction ☐ Health & Safety
☐ IT ☐ Engineering

(3) Area of Learning*: (select one option)

☐ Arts & Crafts ☐ Employment preparation ☐ Information Technology (IT) ☐ Personal Development
☐ Business ☐ English Language ☐ Numeracy/Literacy
☐ Community Development ☐ Health & Welfare ☐ Parent support programmes

Mandatory fields are marked with an asterix (*) - do not leave blank.