



# STEP Accreditation of Prior Experiential Learning

## **Application Form**

#### **Data Protection**

CLT International and STEP are committed to protecting the privacy and security of your personal information. By signing this document, you confirm that you have read, understood and agree to CLT International's Privacy Policy which describes how CLT International and STEP collect and use personal information about you in accordance with data protection law.

Visit www.cltint.com/privacy-policy and www.step.org/privacy-notice to find out more.

Please return the completed form to cltinternational@centlaw.com

Complete the form in English and type or print in **BLOCK LETTERS** 

Complete this application to apply for 30 Entry Level towards STEP membership and progress towards studying at Diploma Level. This form cannot be accepted and your application will not be reviewed until payment has been received. The application fee of £50 + UK VAT can be paid at www.cltint.com.

Please provide the order number given on receipt of payment in the box below:

1. Personal Details		
Title:	First Name:	
Last Name:	Email Address:	
Signature		
2. Details of Current Experiential Learning		
Complete this section if you are currently working in a relevant role. If you hav been working in this role for over 12 months, you do not need to complete section 3 overleaf.	e Key job responsibilities (list between 3–5):	
If you are not currently working in a relevant role, but have been within the las 12 months, please leave this section blank and complete section 3 overleaf regarding your prior relevant experience.	t	
Employer:		
Address:	Briefly list the core activities carried out under each job responsibility (as listed above):	
Town/City:		
County/Country:		
Postcode/Zip:		
Industry sector:	Briefly list the core activities carried out under each job:	
Department:		
Job role/title:		
Dates job held:		
Reported to (job title):		

#### 3. Details of Prior Experiential Learning

Complete this section to give us information about your previous role. You do not need to complete this section if you have completed section 2 and have been working in the specified role for at least 12 months. Key job responsibilities (list between 3–5):

Employer:	
Address:	Briefly list the core activities carried out under each job responsibility (as listed above):
Town/City:	
County/Country:	
Postcode/Zip:	
Industry sector:	Briefly list the core activities carried out under each job:
Department:	
Job role/title:	
Dates job held:	
Reported to (job title):	

### 4. Referee

This section must be completed in full and signed and dated by your chosen referee. Your referee should have known you in a professional capacity during the relevant period and have supervised you work or be a STEP member. They are confirming your technical competence as detailed above.

I can confirm that:	has proven their technical competence as detailed in this form.
Signature:	Date:
Name:	Job title:
Professional Relationship to Applicant:	Company/Business Name:
Email:	Telephone Number:
STEP membership number (if applicable):	