**Application for accreditation of a VSE Expert training course**

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| **Version** | **Release date** | **Distribution** | **State** |
| **1.0** | 02/01/2019 | Public | Public |

 Return this request to the Board of Directors of upto25:

Attn: Softwcare S.L. – upto25

Calle Sangenjo 12, 4-C

28034 Madrid

Spain

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upto25@upto25.net

**Important notes**

1. All fields with an asterisk (\*) from Annexes 1 and 2 have to be completed.
2. Copies of the documentation detailed in Annex 2 must be attached to this application.

**Declaration**

I request accreditation for VSE Expert courses according to the VSE Expert Certification and Registration Scheme. I declare that the training that will be provided with this course will use the complete content of the course and without any change except if said changes are accepted in a clear and unambiguous way by upto25.

I agree that the renewal will be done automatically following a three-year calendar.

**Fees**

Do not send any fee payment with your Application. The fee will be invoiced in parallel with the confirmation of receipt of the request. You will be notified when you must pay the fee.

**ANNEXE 1: IDENTIFICACION**

Tutor or training provider

|  |  |
| --- | --- |
| **First name\*** |  |
| **Name\*** |  |
| **Company**  |  |
| **Country\*** |  |
| **Position in the company** |  |
| **Current responsibilities (in detail)** |  |
| **Birthdate** |  |
| **Address (private or Company) \*** |  |
| **Phone\*** |  |
| **E–Mail\*** |  |

Billing information:

|  |  |
| --- | --- |
| **Name or Business name \*** |  |
| **Fiscal address \*** |  |
| **Tax ID** |  |
| **IBAN \*** |  |
| **BICC \*** |  |
| **Name and address of the bank \*** |  |
| **Contact for billing \*** |  |
| **Phone\*** |  |
| **E- Mail\*** |  |

**ANNEX 1: REQUEST FOR VSE EXPERT TRAINING COURSE ACCREDITATION**

I hereby accept all the terms of this application.

**Type of the course you are applying for:**

* Initiation
* VSE Expert
* New course
* Revised course

If renewal, please fill in your current VSE Expert Training Course Accreditation ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Name\*** |  |
| **Identification\*** |  |
| **Methods and tools \*** |  |
| **N° of modules** |  |
| **N° of days/hours** |  |
| **N° of tests** |  |
| **N° of examinations** |  |

Attach the following documentation to this request.

1. Course program,
2. Description of the modules of the course,
3. Program and schedule of the course.
4. Course exercises and accompanying notes.
5. Questions of the course exam (at least three series),
6. Examination of the course (at least three series) when relevant,
7. Course notes for delegates (full set of materials and slides) including announcement "brochures",
8. Tutor's notes that include presentation material, properly referenced, with relevant teaching points highlighted,
9. Information material of the tutor and delegate,
10. Site requirements (where relevant).

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| For **THE APPLICANT** or **THE COMPANY** | For **UPTO25:** |
|  |  |
| Authorized manager |  |
| Name: | Patricia Rodríguez Dapena |
| Position: | upt25 President. |
| Date: (Signature and stamp) | Date: (Signature and stamp) |
|  |  |

**Send a signed and stamped copy by email (upto25@upto25.net)**

*According to the RGPD 2018 we inform you that your data is included in a file responsible for Softwcare S.L. with the purpose of managing the relationship with you for this specific commercial or technical purpose. We will keep you informed of the organization and use of these data with a request for your consent for the use of your personal data. These consents will be revocable and may exercise at any time your rights of access, rectification, opposition, cancellation, transparency of information, deletion, limitation and portability by contacting upto25.*

END OF THE APPLICATION