

**Certificate in Community Studies :**

**Application Form 2025/2026**

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| **SECTION 1: PERSONAL DETAILS – Please complete in block capitals** | | | |
| **First Name:** | | **Surname:** | |
| **Address:** | | | |
| **Mobile:** | | **Email:** | |
| **Date of Birth:** | | **Gender:** | |
| **Country of Birth:** | | **Citizenship:** | |
| **Occupation:** | | **PPS Number:** | |
| **SECTION2: VOLUNTARY/PAID COMMUNITY WORK EXPERIENCE** | | | |
| **Organisation Name:** | | | |
| **Address:** | | | |
| **Telephone:** | | | |
| **Your Role:** | | | |
| **Supervisor’s Name:** | | | |
| **Please explain: (i) why you want to do the course; and (ii) what benefits do you think it will be to you as a volunteer or community worker, to your organisation and the wider community (Max. 250 words)** | | | |
| **Would you like to stay in touch with SETU:** | **Yes** | | **No** |

SECTION 3: Declaration: I confirm that the details I have provided are accurate and that I understand the information outlined above.

Signature: Date:

***Please return to***[*rhearne@wit.ie*](mailto:rhearne@wit.ie)***on or before 1St of September 2025***