London College of Ayurvedic Medicine (LCAM)
Course Registration Application Form

Thank you for your interest in studying with the **London College of Ayurvedic Medicine**. Please complete the following application form. The information provided will be used to assess your suitability for the course, support your learning needs and maintain appropriate learner records.

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1. Course Details

Course Title: _____
Course Code:
Course Start Date: _____

How did you hear about this course?
☐ College website
☐ Email
☐ Social media
☐ Professional association
☐ Colleague/referral
☐ Seminar/conference
☐ Other: _____

2. Personal Details
Title: ☐ Dr ☐ Mr ☐ Mrs ☐ Ms ☐ Other: _____
Full Name: _____
Date of Birth: _____
Address: _____

Postcode: _____
Telephone: _____
Email: _____

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3. Professional and Educational Background
Current Professional Role/Job Title:

Current Employer/Organisation (if applicable):

Highest Educational Qualification:

Other Relevant Qualifications:

Qualification Institution/Awarding Body Year

Relevant Professional Experience:

Please provide a brief summary of your professional experience, particularly any experience relevant to the course.

4. Professional Registration and Membership

Are you currently registered with a professional or regulatory body?

☐ Yes ☐ No

If yes, please provide details:

Name of Professional/Regulatory Body:

Registration/Membership Number (if applicable):

Professional Status/Category:

Expiry/Renewal Date (if applicable): _____

Are you a member of any professional association relevant to your profession?

☐ Yes ☐ No

If yes:

Name of Association(s):

Membership Number(s), if applicable:

5. Previous Experience of Ayurveda

Do you have any previous knowledge, training or experience in Ayurveda?

☐ None

☐ Limited

☐ Some experience

☐ Extensive experience

If applicable, please provide details of any Ayurvedic education, training or professional experience:

6. Previous Experience in Healthcare / Caring Professions

Do you have professional experience in healthcare, nursing, social care, complementary medicine or another caring profession?

☐ Yes ☐ No

If yes, please provide details:

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7. Learning Needs and Expectations
What are your main reasons for applying for this course?

What do you hope to gain from the course?

How do you expect to use the knowledge or skills gained from this course in your professional practice?

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8. CPD and Professional Development
Are you intending to use this course towards your Continuing Professional Development (CPD) requirements?
☐ Yes ☐ No ☐ Not sure
If yes, please state the relevant professional body or organisation, if applicable:

Do you require any specific information or documentation for your professional CPD record?
☐ Yes ☐ No
If yes, please specify:

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9. Accessibility and Learning Support
Do you have any **accessibility, disability, learning or other support requirements** that you would like the College to be aware of?
☐ Yes ☐ No
If yes, please provide details so that we can consider appropriate support:

You may contact the College separately if you prefer to discuss your requirements confidentially. admin@setrameduk.com

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10. Declaration
I confirm that the information provided in this application is **accurate and complete to the best of my knowledge**. I understand that I should notify the London College of Ayurvedic Medicine if there are any significant changes to the information provided.
I understand that submission of this application does not necessarily constitute acceptance onto the course and that the College may contact me if further information is required.
Applicant Name: _____
Signature: _____
Date: _____

For London College of Ayurvedic Medicine Use Only
Application received: _____
Reviewed by: _____
Application outcome:
☐ Accepted
☐ Accepted subject to further information
☐ Further information required
☐ Not accepted
Comments/Notes:

Reviewer Signature: _____
Date: _____

Data Protection
The information provided in this application will be handled confidentially and processed in accordance with the College's **Data Protection and Confidentiality Policy** and applicable UK data protection legislation. Information will be used for legitimate purposes relating to course administration, learner support, quality assurance and professional development.