Application for admission  
Professional Certificate in Team and Systemic Coaching (Nordic intake)

Please fill in all sections and return by email to **info@henley.fi** or **your contact person** at Henley Business School Finland.

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| Section 1 Personal details | |
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| **1.1** Title (Mr/Mrs/Ms/Miss/other) |  |
| **1.2** Surname (Family name) |  |
| **1.3** Forenames (in full) |  |
| **1.4** Preferred name |  |
| **1.5** Gender (male/female) |  |
| **1.6** Date of birth (dd/mm/yyyy) |  |
| **1.7** Ethnicity (UK/EU applicants only) |  |

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| Section 2 Residence | |
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| **2.1** Nationality |  |
| **2.2** Country of birth |  |
| **2.3**  Country of permanent residence |  |

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| Section 3 Contact details | |
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| **3.1** Home address |  |
| **3.2**  Postcode |  |
| **3.3**  Country |  |
| **3.4** Telephone |  |
| **3.5** Mobile |  |
| **3.6** Email |  |

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| Section 4 Employment and experience details | | | | | | | |
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| **4.1**  Present job title |  | | | | | | |
| **4.2**  Department |  | | | | | | |
| **4.3** Employer |  | | | | | | |
| **4.4** Industry type |  | | | | | | |
| **4.5** Address (including postcode) |  | | | | | | |
| **4.6** Telephone |  | | | | | | |
| **4.7** Email |  | | | | | | |
| **4.8** Please describe your current duties and responsibilities, and describe your major achievement in this role: |  | | | | | | |
| **4.9**  Number of years’ relevant management experience  (e.g. managing people, projects) |  | **4.10** Number of years’ full-time work experience | | |  | | |
| **4.11** Previous coaching experience (please provide brief details) |  | | | | | | |
| **4.12** Please can you give us an approximation of the number of hours’ coaching experience you have | Individual Coaching | | | Team Coaching | | | |
| **4.13** Do you have experience of regularly facilitating teams and groups and/or team leadership using facilitation techniques? | Yes  No | | **4.13a** If yes, please say how many years | | |  | |
| **4.14** Please confirm if you already have coach accreditation? | Yes  No | | | | | | |
| **4.14a** If yes, please confirm which coach accreditation you have achieved (including accreditation body and level) |  | | | | | | |
| **4.15** Previous coach training or qualifications (please provide brief details) |  | | | | | | |
| **4.16** The programme requires completion of 35 hours’ team coaching practice during its 9-month duration. Please tick to confirm your understanding and acknowledgement of this | | | | | | | Yes |

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| Section 5 Education and English language | |
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| **5.1** Please state your highest academic qualification (e.g. Bachelors degree, A levels) |  |
| **5.2**  Please state whether this was obtained in the UK/EU/other overseas country |  |
| **5.3** Is English your native language? |  |
| **5.4** If no, please supply details of any English language test taken (date and result) |  |

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| Section 6 Disability |

If you have a disability that may affect your learning, please provide details:

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| Do you have a disability? | Yes  No | |
| If yes, what is the nature  of your disability? | A learning difficulty, e.g. dyslexia  Autistic Spectrum Disorder  Blind/partially-sighted Deaf/hearing impairment  Mental health difficulties  Personal care support | Unseen disability, e.g. diabetes, epilepsy,   asthma  Wheelchair user/mobility difficulties  Multiple disabilities. Specify below.  A disability not listed above. Specify below. |
| Further details of disability  if required |  | |

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| Section 7 Programme details |

Please select the programme dates that you wish to apply for

**Programme dates for the academic year 2024/5**

| **March 2025 – TSCMAMF25FI**  Workshop 1: 27-28 March 2025 (Copenhagen)  Workshop 2: 27-29 April 2025 (Henley, UK)  Workshop 3: 05-06 June 2025 (Helsinki) |  |  |  |
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| ection 8 Marketing information |

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| **8.1** Have you used Henley Business School before? | | Yes  No | |
| **8.2** Does your organisation regularly use other business schools | | Yes  No | |
| If so, which one(s) does it use? |  | | |
| **8.3** Please indicate the main source of information which prompted you to apply for the Professional Certificate in Coaching: |  | | |
| **8.4** Please indicate if you are a member of the **Henley Partnership** | | | Yes  No |

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| Section 9 Declaration |

I declare that the information given on this form is true, complete and accurate and that no information requested,   
or other material, has been omitted.

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| Signature |  |
| Date |  |

If any of the information on your application form is found to be false, it may lead to the withdrawal of your place at the University.

**Data protection**

Please note: The personal information you supplied will be used to help us respond to your request, for quality assurance and for data analytics purposes. Your personal data will not be sold to any organisation and will not be shared with any organisations outside the University of Reading apart from those that help us to provide this service or unless required by law. The information that has been provided in this form will be treated in accordance with the General Data Protection Regulation (2016), the UK Data Protection Act 2018 and all applicable Data Protection laws. Please refer to the University of Reading at (www.reading.ac.uk/15/about/about-privacy.aspx) for more information.