**eCollege Online Course: Certified Digital Marketing Professional**

**Application Form**

***Please complete all sections of the form and submit by e-mail to*** ***ecollege@fess.ie*** ***by Monday 11th September 2017.***

***Please Note: NO OTHER EMAIL ADDRESS SHOULD BE USED AND THE CLOSING DATE WILL BE STRICTLY ADHERED TO.***

***This is a National Pilot and places will be limited to 30. Selection will be based on information provided in this application form, so please ensure that all sections are completed. All applicants will be notified about the status of their application the week beginning 18th September.***

|  |  |
| --- | --- |
| **Applicant Name:** |  |
| **E-mail address:** |  |
| **Mobile number:** |  |
| **College/Centre Name and Address:** |  |
| **ETB Name (where relevant):** |  |
| **Work Role / Title:**  |  |
| **Previous Industry Experience in Digital Marketing (if any)** |  |
| **Previous CPD Experience in Digital Marketing (if any)** |  |
| **How did you hear about the eCollege Online Course: Certified Digital Marketing Professional?** |  |
| **What are you hoping to achieve by doing this course – Certified Digital Marketing Professional? How will it benefit your role?** | **Please Comment:** |
| **Do you have basic computing skills?** | **Yes / No** |
| **Do you have access to any tools such as a website, google account? Having access to these tools at home will allow you to practice techniques demonstrated on the course.**  | **Please list any that apply:** |
| **There are no course fees for FET Staff (standard course value is €2000.00).****Will you commit to fully participating in and finishing the course? Please be aware that you will be expected to complete the course within the 26 week time frame and dedicate approximately 3 hours per week to the course. This can be done at a time that suits you.** | **Please comment:** |
| **If offered a place, are you in a position to attend a half day induction workshop on Wednesday 27th September where you will meet your eTutor and fellow online FET colleagues?** | **Yes/No****If applicable, have you sought authorisation to attend from your Manager / Principal / Director?****Yes/No****Authorisation given by:**  |
| **Will you commit to sitting the 3 hour exam at the end of the course at one of the Pearson VUE testing centres?**  | **Yes/No** |
| **During the course / following the course are you prepared to provide feedback to eCollege / FESS on your experience?** | **Yes/No** |

|  |
| --- |
| **Any other relevant information in support of your application?** |

**\* Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*The receipt of this completed application form by e-mail constitutes an electronic signature.**

**Closing date for receipt of applications**: ***Monday 11th September 2017***

***Please send to:*** ***ecollege@fess.ie***