

**Application Pack**

Please find enclosed the following:

1. Introduction to Aesop Institute 2019
2. Criteria for selection and application process
3. Application form – to be completed by applicant
4. Declaration – to be completed by the applicant

Should you require any further information or have any questions in regards to the application process please contact us at **info@ae-sop.org**



Dear Applicant

Many thanks for your interest in **Aesop Institute 2019**. As co-directors of the programme we’re excited that Aesop and Canterbury Christ Church University Faculty of Health and Wellbeing are collaborating to deliver a module specifically designed for busy Arts and Health Professionals wishing to develop the values and beliefs, knowledge, skills and competencies relevant to the provision and growth of successful arts in health programmes.

The programme responds to demand from both Health and Arts Professionals for accredited, quality-assured arts in health training that can fit around busy work schedules.

**Who is it for?**

Aesop Institute is suitable for **facilitators**, **practitioners**, **producers**, **programmers** and **key decision makers** working in the arts, health, care or charity sectors.

**What is the course format and assessment?**

The programme will start with a three-day residential in Folkestone running from **14 – 16 May 2019**, with a two-day follow-up residential on **3 – 4 September 2019** (in Canterbury).

Researchers and experienced innovators in arts and health will provide current perspectives on developments in the field during the programme. From May to September, following the first residential, Aesop Institute students will develop and deliver arts and health programmes, fully supported by the Aesop Institute team. A portfolio of work-based development activity on arts and health will be submitted for assessment in September 2019.

The module is accredited by Canterbury Christ Church University and students who successfully complete the programme will be awarded academic credits at Level 4 through 7 dependent on highest level of qualifications.

**Fees**

The fee for the course and catering at both residentials is £575. The additional cost of accommodation is £400. This is the nights of 13, 14 and 15 May and 2 and 3 September.

We do hope you can join us and look forward to receiving your application.

Best wishes

|  |  |
| --- | --- |
|  |  |
| Tim Joss  Chief Executive & Founder  Aesop | Professor Stephen Clift  Centre Director  Sidney De Haan Research Centre for Arts and Health  Canterbury Christ Church University |



**Criteria for selection**

Aesop Institute is suitable for facilitators, practitioners, producers, programmers and key decision makers working in the arts, health, care or charity sectors.

We also ask that applicants have an arts and health project or are developing an arts and health project that will run between May and September 2019 and form the basis of work-based learning.

**Application process**

Please complete and return the relevant sections of the attached application form and signed declaration form and return to [info@ae-sop.org](mailto:info@ae-sop.org) by **15 February 2019**. If you have any questions or require any assistance with the application form, please contact us at the above email address.

Applicants will be notified by **15 March 2019** as to whether their application has been successful. Successful applicants will be issued an invoice, a university application form and further details regarding the residentials from Canterbury Christ Church University.



**Application Form**

|  |  |
| --- | --- |
| **MR/MRS/MISS/MS (please circle or add another title)** | **FORENAME:** |
| **SURNAME:** | **PREVIOUS SURNAME (IF APPLICABLE):** |
| **Address (Home):**  **Tel No:** | **Address (Work):**  **Tel No:** |
| **Mobile:** | **Directorate/Division (if applicable):** |
| **Date of Birth:** dd/mm/yyyy | **Profession (e.g. OT):** |
| **E-mail address (This will be our main method of contacting you to confirm receipt of your application. Please check your Spam / Junk folder if you have not received confirmation in your inbox.):** | |

|  |  |  |  |
| --- | --- | --- | --- |
| **HIGHEST PREVIOUS QUALIFICATIONS** | | | |
| Please give details of your highest previous academic and/or professional qualifications in this section (e.g. NVQ, DipHE, BSc, BSc (Hons), MSc, MA). | | | |
| **Name and Address of School, College or University** | **Dates Taken** | **Qualification Gained** | **Results** |
|  |  |  |  |
| **ANY OTHER RELEVANT PROFESSIONAL QUALIFICATIONS** | | | |
| **Name and Address of Institution** | **Dates Taken** | **Qualification Gained** | **Results** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **EMPLOYMENT/VOLUNTEERING EXPERIENCE**  Please give details of voluntary and paid employment undertaken in the last 5 years (if you require more space, please attach an additional sheet to this application form) | | |
| **Name of Employer** | **Dates** | **Duties and Responsibilities** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| **PERSONAL STATEMENT (250 WORDS)**  You are invited to set out any other information that you consider relevant to your application (e.g. details of previous study, special interests and the reason you are applying). You should continue on a separate sheet if necessary. |
|  |

|  |
| --- |
| **YOUR ARTS & HEALTH PROJECT**  As part of the module you will be required to be working on an arts and health project between May and September. Please tell us more about your project and what you hope to achieve. |
|  |

|  |
| --- |
| **Where did you find out about Aesop Institute?** |
|  |

****

**Declaration**

Please complete and sign the declaration below and return with your application form:

I confirm that by submitting this application I wish to be part of Aesop Institute 2019, including attendance at the two residentials in May and September, and that the contents of my application are true. If accepted on to the module the invoice for £575 (plus the accommodation costs if applicable) will be paid within 30 days.

Signed …………………………………………………………………………………

Print name ………………………………………………………………………….

Date ……………………………………………………….