



For Office Use:-

**Specialist Skills & Post Registration Development (SSPRD) CPD Fees and Funding Form**

Please check the details on Section 1 & 2 of this form, and complete Section 3. Please print and sign the form, then pass onto your line manager & LBR lead for completion of Section 4, before returning the form to the School of Nursing and Midwifery. Further guidance notes are overleaf.

**1. Personal Details**

Surname		Forename	
Email		Date of Birth	
Professional Group		Contact number	
Employer			
Previous registration number if studied with us previously – if known (please enter)			

**2. Programme or unit you have applied for:** (for further details of the level of study, please see guidance notes on next page)

Programme or Unit Code	Title	Start date

**3. Please tick the relevant box, if you are eligible to receive funding from:**

Yorkshire and the Humber <input type="checkbox"/>	East Midlands <input type="checkbox"/>
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If you are unsure whether you qualify for NHS LBR funding, please see [www.shef.ac.uk/hscspd/funding](http://www.shef.ac.uk/hscspd/funding)

**4. Declaration**

I hereby accept and agree to observe the Charter, Statutes, Ordinances and Regulations of the University of Sheffield, including those relating to health and safety, discipline, intellectual property rights and specific Safety Regulations of Departments and Divisions (available from Heads of Departments and Chairmen of Divisions). I confirm that I have not undertaken any of the Units applied for previously (either at the same or a different level). I understand that any units previously undertaken will not be credited to my academic award

**Data Protection Act**

I confirm that the personal data on this form is accurate and complete and I consent to it being processed by the University of Sheffield in accordance with its registration under the Data Protection Act 1998. I understand that this data will be used by the Higher Education Statistics Agency for statistical purposes, and by the relevant sponsor for the purposes of recording professional awards and may be passed to the Council Tax Office of the local authority, and that the University may process my data for research purposes and market research. You should be aware that the information about your enrolment, attendance and progress at this establishment may be passed to the IND of the Home Office for purposes connected with immigration. I hereby give my consent to the processing of the sensitive personal data, as defined by the Data Protection Act 1998, which I have provided separately to assist the University in monitoring its equal opportunities policy and socio-economic trends. I agree to information and progression details be shared with my employing organisation and relevant Health Education commissioner.

Applicant signature..... Date .....

**Trust/Private Organisations to complete:**

If you are unsure who your LBR lead is, please see: [www.sheffield.ac.uk/hscspd/lbr\\_leads](http://www.sheffield.ac.uk/hscspd/lbr_leads)

**5a. I confirm that the Trust/Organisation named below has authorised the person named on this form to receive funding for the programme/unit listed in Section 2**

Name of Trust/Private Organisation \_\_\_\_\_

LBR Lead signature:	Line Manager signature:
Print Name:	Print Name:
Email address:	Email address:
Date:	Date:

**5b) Self-funded**  Tuition fee to be paid by me: £ \_\_\_\_\_

If you are paying all or some of your tuition fee, you do not need to pay the fee now. The University will send you an email advising you to register and pay your tuition fee online.

**5c) Sponsored**  Tuition fee to be paid by my sponsor (eg your employer): £ \_\_\_\_\_

If an external sponsor is paying your tuition fee you must attach written confirmation on company letter-headed paper.

If you do not know the cost of your selected unit(s) please email [snm.enquiries@sheffield.ac.uk](mailto:snm.enquiries@sheffield.ac.uk)

Please scan & email the fully completed form, at least 7 weeks prior to commencement to [snm.enquiries@sheffield.ac.uk](mailto:snm.enquiries@sheffield.ac.uk) or post to: CPD Admissions, School of Nursing and Midwifery, University of Sheffield, Barber House Annexe, 3a Clarkehouse Road, Sheffield, S10 2LA

# GUIDANCE NOTES FOR COMPLETION OF THE FEES AND FUNDING FORM

## Section 1:– Personal Details

Most of your personal details will be pre-populated, from your application form. If you have studied with us before, please enter your previous registration number if known. Please enter a contact telephone number.

## Section 2:- Programme or unit you have applied for

This section is pre-populated from your application form. There will be one fees and funding form for each unit/programme you have applied for.

Please ensure you are applying for the correct level of study. Please refer to our webpages for full details of the Programme/Unit codes and programme module titles. The webpage will also indicate the number of academic credits for the Programme/Unit you are applying for.

If you are unsure about which academic level you want to study, please refer to the Programme/Unit information on our website – there will be a contact name for the Programme/Unit leader if you have any queries. It is not possible to change academic levels once you have started the course. If you have applied for the wrong academic level, please complete the initial application form again. A new fees and funding form will then be sent to you for completion.

As a guide, all units where the first number starts with a 2 (i.e. SNM2xx) are Diploma level, if they start with a number 3 (i.e. SNM3xx), they are Degree level, and if they start with a number 6 (i.e. SNM6xx), they are Masters Level units.

## Section 3: Please tick relevant box if eligible to receive funding

If you work within Yorkshire and the Humber or East Midlands, you may be eligible for funding. Please refer to our website to check whether you qualify for funding - [www.shef.ac.uk/hscspd/funding](http://www.shef.ac.uk/hscspd/funding) Please tick the relevant box if you qualify for funding.

Funding from Yorkshire and the Humber and East Midlands is limited. The Admissions Team will advise you once you have submitted your fees and funding form, if there is no funding available. If there is no funding available, you can either self-fund, or approach your employer to request that they sponsor you.

## Section 4: Declaration

Please print the fees and funding form, read the declaration and DPA statement, then sign and date the form.

## Section 5a: Trust/Private Organisations to complete

If you are seeking funding from either East Midlands or Yorkshire and the Humber (South Yorkshire Region) please ensure your line manager and LBR lead signs the form.

If you do not know who your LBR lead is, you can find out via: [www.sheffield.ac.uk/hscspd/lbr\\_leads](http://www.sheffield.ac.uk/hscspd/lbr_leads)

## Section 5b - If you are self-funding, please tick the relevant box.

The University will contact you to register and pay your tuition fee online.

## Section 5c - If you are sponsored by your employer, please tick the relevant box.

You must attach written confirmation of sponsorship on company letter headed paper with the fees and funding form.

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**Please return the fully completed form, at least 7 weeks prior to programme/unit commencement to:**

CPD Admissions, School of Nursing and Midwifery, University of Sheffield, Barber House Annexe,  
3a Clarkehouse Road, Sheffield, S10 2LA

Alternatively, you can scan and email a copy over to [snm.enquiries@sheffield.ac.uk](mailto:snm.enquiries@sheffield.ac.uk)