

# Application Form: Home Care Basics

TODAYS DATE: ..... PRINT FULL NAME: .....

GENDER: .....

NEXT OF KIN: (in case of emergency) .....

CURRENT PHYSICAL ADDRESS: ..... MAILING ADDRESS: .....

EMAIL ADDRESS: ..... PLACE OF BIRTH: .....

NATIONALITY: ..... HOW LONG HAVE YOU LIVED IN THE BVI .....

STATUS: (please check one box)

RESIDENT  WORK PERMIT  EXEMPTION  VISITOR  OTHER

MOBILE PHONE #: .....

ALTERNATE PHONE #: .....

EDUCATION & SKILLS:

PRIMARY  SECONDARY  COLLEGE  TRADE SCHOOL  OTHER  BASIC FIRST AID

DO YOU HAVE ANY PREVIOUS EXPERIENCE WORKING WITH THE ELDERLY? YES  NO

DO YOU HAVE ANY PREVIOUS TRAINING IN CARE OF THE SICK OR ELDERLY? YES  NO

APPLICANT SIGNATURE: .....

**NOTE: A fee of \$400.00 must be fully paid by 2<sup>nd</sup> March 2020. Failure to do so will affect your participation in this course. Deadline for registration is 21<sup>st</sup> February 2020. Basic First Aid and Darkness to Light are prerequisites to taking the Home Care Basics Class.**

**FOR OFFICIAL USE ONLY**

FEES DUE: | .....

FEES PAID: | .....

BALANCE DUE: | .....

BALANCE DUE DATE: | .....

RECEIPT #: | .....

BVI RED CROSS REPRESENTATIVE SIGNATURE: