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**Conway Education Centre**

**5/7 Conway Street**

**Belfast BT13 2DE**

**Tel.: 02890 248543**

**Email:** [**info@conwayeducation.org**](mailto:info@conwayeducation.org)

[**www.conwayeducation.org**](http://www.conwayeducation.org)

**TUTOR APPLICATION FORM**

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| --- | --- |
| **Name:** | **E mail address:** |
| **Address** | **Telephone number:**  **Mobile number** |
| **Accredited course to be delivered:** | |
| **Please tell us about your qualifications and experience relevant to the delivery of this course:** | |
|  | |
| **Referee 1** | **Referee 2** |
| **Additional information** | |