

## H1 Certification of Competence

Mr Andrew Matthews is currently completing a **WAMITAB** course.

As he has not yet finished it, he doesn't hold a certificate, however the reference number for the course is: **4MTMPL6**

  
**Environmental Leadership**  
**Learner Registration Form**  
**NORTH WEST REGIONAL ASSESSMENT CENTRE**  
**440 St Helen's Road**  
**Bolton**  
**BL3 3RS**  
**TEL: 01204 658691**

|   |  |
|---|--|
| Name: (Mr/Ms/Ms/Ms/Dr/Other)<br>(as it will appear on your certificate)   |  |
| Home Address<br><b>Aberbran Fawr</b><br><b>Brecon</b><br><b>Powys</b><br>Postcode<br><b>LD3 9NG</b><br>Home Tel No:<br><br>Mobile No: <b>07977 091 462</b><br>Day time telephone No:<br><b>As above</b>   | Company Name & Address (for invoicing purposes)<br><b>AG Matthews</b><br><b>Aberbran Fawr</b><br><b>Brecon</b><br><b>Powys</b><br>Postcode<br><b>LD3 9NG</b><br>Company Tel No:<br><br>Contact Name & Tel No. for account/invoice queries:<br><b>07977 091 462</b><br>Email address for accounts correspondence:<br><b>andy@aberbranfawr.co.uk</b> |
| Date of Birth   | Photo ID Provided: Driving Licence, Passport<br>Other: _____   |
| Wherever possible we try to send correspondence by email, if you have access to an email address please could you provide us with these details:  |  |
| Special Requirements: Including support for numeracy and literacy, (please detail any physical or sensory disability that may require special facilities or treatment)<br><br>Have you been registered with WAMITAB before?<br><b>Yes/ No</b><br><br>If Yes, please advise us of your Registration Number and previous award.   | Site Name, Address & Postcode (if different from above)<br><b>As above</b><br><br>Site Tel No.<br><br>Manager Name:<br><br>Manager Contact Telephone No:   |
| Type of Site (e.g. Non Hazardous Transfer Station):-<br><br>Risk Category:- <del>High</del> / Medium / <del>Low</del><br><small>* please delete as appropriate</small><br>Standard rules permit no. (if applicable): <b>SR2010 No.4</b><br><u>Candidate Signature</u>   | Type of Award:- <b>WBQ / <del>WBQ</del></b><br><small>* please delete as appropriate</small><br>If you are in a high risk category, do you also wish to register for the Certificate of Technical Competence?<br>Yes / No  |
| I accept & agree to abide by the guidelines issued by the North West Regional Assessment Centre & I confirm that photographic evidence can be used within my portfolio.<br><b>Employers Undertaking</b> The Company will pay all fees in accordance with the Centre terms & conditions. The Candidate will be provided with suitable and sufficient support and resources to achieve the OCC. The Company will abide by the Equal Opportunities Policy of the Centre and will abide by the Health & Safety requirements in connection with the Qualification. |  |
| Signed <b>A G Matthews</b> Position <b>OWNER</b> Date <b>13/7/2012</b>  |  |

Your information will be held on a database and will be used in connection with the achievement of your Qualification. If you do not wish to receive any information on courses, or other marketing material from the Centre, then please place a tick in this box .

The North West Regional Assessment Centre is a Trading Name of Environmental Leadership Ltd.

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