



Foras Áiseanna Saothair  
Training & Employment Authority

## CONSTRUCTION SKILLS CERTIFICATION SCHEME

Experienced Plant Operator

Application for Training and Assessment

### SECTION 1: Participant Details

Participants Name <small>(BLOCK CAPITALS):</small>		PPS No.
Address:		
Date of Birth:	Telephone No.:	
Safe Pass No.	CSCS Reg. No.: <i>(if applicable)</i>	

Have you successfully completed the FÁS Approved Safe Pass Training Programme

Yes  No

*Note: Please include with your Application:-*

- A copy of the Safe Pass Registration Card as proof of completion of Safe Pass training
- One Passport Sized Photograph (signed on the reverse side)

### SECTION 2: Company Details

Company Name	Address:	
	Telephone:	Fax:

*I/We confirm that the applicant has:-*

- Gained their experience in accordance with the 9<sup>th</sup> Schedule – Guidelines to the Safety, Health and Welfare at Work (Construction) Regulations, 2001 - S.I No. 481\_of 2001
- A Current Full Driving Licence *(if applicable)*
- A Current Safe Pass Registration Card
- Has a minimum of six months operative experience of the items of plant for which training and assessment is applied for.

#### Declaration which MUST be signed by the company

I declare that the information given in this form is correct to the best of my knowledge and belief.

Signed: \_\_\_\_\_ Position: \_\_\_\_\_ Date: \_\_\_\_\_

*Note: The provision of false information will render this FÁS Registration invalid*

Course Costs:      All Plant Courses: €350 per person per item  
Card Renewal:      €100

*Item(s) of Plant for which Training and Assessment is applied for. (Please tick box)*

Tower Crane	<input type="checkbox"/>	180° Excavator	<input type="checkbox"/>	360° Excavator	<input type="checkbox"/>
Telescopic Handler	<input type="checkbox"/>	Slinger/Signaller	<input type="checkbox"/>	Tractor Dozer	<input type="checkbox"/>
Site Dumper	<input type="checkbox"/>	Mobile Crane	<input type="checkbox"/>	Crawler Crane	<input type="checkbox"/>
Self Erect Crane	<input type="checkbox"/>	Mini Digger	<input type="checkbox"/>	Articulated Dumper	<input type="checkbox"/>
Card Renewal	<input type="checkbox"/>				

Amount Enclosed: € \_\_\_\_\_

Date of Course Attendance: \_\_\_\_\_



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*PLEASE NOTE:*

- *In order to complete course in one day, course will start at 8.30am*
- *Aseparate application/booking form must be completed for each applicant*

COURSE FEES

*IF COURSE FEES ARE NOT PAID 10 DAYS PRIOR TO START DATE OF COURSE, FÁS WILL RESERVE THE RIGHT TO ALLOCATE YOUR PLACE TO OTHER APPLICANTS.*

THERE IS NO REFUND FOR NON ATTENDANCE ON COURSE

*This Form along with a cheque must be returned to:*

**The relevant FÁS Training Services Unit**

**FOR FÁS OFFICE USE ONLY**

**Date Rec'd:** \_\_\_\_\_ **Receipt No:** \_\_\_\_\_ **Amount Rec'd:** \_\_\_\_\_ **Cheque No:** \_\_\_\_\_