

# APPLICATION FORM

I would like to attend the following course at South Thames College:

Course Title .....

Starting date .....

Name .....

Address .....

email ..... Tel. ....

Trade Union .....

Post held .....

Previous TUC courses (with dates) .....

Employer's name .....

Employer's address .....

I am a fully paid up member and representative of my union. My employer has agreed to me attending this course.

Do you require disabled facilities?  (please tick if appropriate)

Signed .....

Signed by full-time official or branch official

Please return this form to:

**TUC Course Applications, South Thames College, 27a Carlton Drive, London SW15 2BS**

**Tel. 020 8918 7383**

**Email: [graham.petersen@south-thames.ac.uk](mailto:graham.petersen@south-thames.ac.uk)**

**TRADE UNION STUDIES CENTRE**  
**South Thames College, Tooting Centre,**  
**71 Tooting High Street, London SW17 0TQ**

**Train: Tooting**

**Tube: Tooting Bdy.**

**Bus: 44, 77, 57, 155, 127, 219,**  
**264, 270, 280, 333, 355,**  
**493, G1**

