



# Registered Design & Technology Health & Safety Consultant (RDTHSC) Application Form

**N.B. Please read the 'RDTHSC NOTES OF GUIDANCE'  
(available on the D&T Association website) before completing this form**

Title: \_\_\_\_\_

First Names: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Post Code: \_\_\_\_\_

Email: \_\_\_\_\_

Home Tel: \_\_\_\_\_

Work Tel: \_\_\_\_\_

Work Tel: \_\_\_\_\_

If your application is successful, these contact details will be included on the D&T Association website unless you specify otherwise.

If applicable, please provide the following:

DfES/DCSF teacher no: \_\_\_\_\_

D&T Association membership no: \_\_\_\_\_

Are you a qualified teacher? (Please circle)    **YES**                      **NO**

If you are not a qualified teacher, please provide details of your current post

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Do you hold current accreditation on the TDA/D&T Association Accreditation scheme?

Please circle: YES NO

If NO, have you attended any H&S training in the last 5 years? Please circle: YES NO

Please tick in the left hand boxes below, those TDA/D&T Association Standards on which you would like to be registered to train others.

For each box that you have ticked, please provide dates and details of the personal training you have undertaken to support your application and attach copies of your accreditation certificates to this form.

	TDA/D&TA H&S Core and Specialist Training Standards	Dates and/or Evidence of Training
<input type="checkbox"/>	PHS (Primary)	
<input type="checkbox"/>	SCHS (Secondary Core) <i>(NB Applicants for the Secondary Core will need to attend a Core 'training the trainers' session before delivering these Standards to others)</i>	
<input type="checkbox"/>	SFHS (Secondary Food)	
<input type="checkbox"/>	SMHS (Secondary Materials)	
<input type="checkbox"/>	SSHS (Secondary Systems and Control)	
<input type="checkbox"/>	STHS (Secondary Textiles)	

	TDA/D&TA H&S Specialist Extension Training Standards	Dates and/or Evidence of Training
<input type="checkbox"/>	<b>Wood sawing machines (S1HS)</b> <ul style="list-style-type: none"> <li>• Power fret</li> <li>• Narrow band</li> <li>• Circular</li> <li>• Radial arm</li> <li>• Vertical Panel Saw</li> </ul>	
<input type="checkbox"/>	<b>Centre lathe (S2HS)</b>	
<input type="checkbox"/>	<b>Casting non-ferrous metals (S3HS)</b>	
<input type="checkbox"/>	<b>Metal arc welding (S4HS)</b> <ul style="list-style-type: none"> <li>• MMA</li> <li>• MAG</li> <li>• MIG</li> <li>• TIG</li> </ul>	
<input type="checkbox"/>	<b>Oxy-acetylene welding and cutting (S5HS)</b>	
<input type="checkbox"/>	<b>Milling and machining centres (S6HS)</b> <ul style="list-style-type: none"> <li>• Vertical</li> <li>• Horizontal</li> <li>• CNC</li> </ul>	
<input type="checkbox"/>	<b>Wood turning lathe (S7HS)</b>	
<input type="checkbox"/>	<b>Planer/thicknesser machines (S8HS)</b> <ul style="list-style-type: none"> <li>• Overhand planer</li> <li>• Thicknesser</li> </ul>	
<input type="checkbox"/>	<b>Portable Power Tools (S9HS)</b> <ul style="list-style-type: none"> <li>• Portable Grinder</li> <li>• Rotating Portable Saw</li> <li>• Reciprocating Portable Saw</li> <li>• Biscuit Cutter</li> <li>• Portable Planing Machine</li> <li>• Portable Router</li> </ul>	
<input type="checkbox"/>	<b>Grinding &amp; Sharpening (S10HS)</b>	
<input type="checkbox"/>	<b>Site Staff (S11HS)</b>	

The cost of RDTHSC Registration is as follows: £150 for D&T Association members  
£180 for non-members

Please circle the appropriate box: £150 / £180

As a registered consultant/trainer you will need to acquire 2 types of insurance: Professional Indemnity and Public Liability cover.

You may already hold this if you are an employee of a school, but you are advised to check and provide evidence if you do.

The D&T Association can offer you Professional Indemnity insurance or Professional Indemnity and Public Liability insurance at the costs listed below:

Do you require D&T Association Professional Indemnity insurance cover only? (please circle) YES NO

Do you require D&T Association Professional Indemnity and Public Liability insurance cover? (please circle) YES NO

Insurance policies run to 31 March each year. Please tick in the left hand boxes below the period of cover you require:

**Professional Indemnity cover only:**

<input type="checkbox"/>	1 Apr – 31 March (12 months' cover)	£144.00
<input type="checkbox"/>	1 May – 31 March (11 months' cover)	£132.00
<input type="checkbox"/>	1 June – 31 March (10 months' cover)	£120.00
<input type="checkbox"/>	1 July – 31 March (9 months' cover)	£108.00
<input type="checkbox"/>	1 Aug – 31 March (8 months' cover)	£96.00
<input type="checkbox"/>	1 Sept – 31 March (7 months' cover)	£84.00
<input type="checkbox"/>	1 Oct – 31 March (6 months' cover)	£72.00
<input type="checkbox"/>	1 Nov – 31 March (5 months' cover)	£60.00
<input type="checkbox"/>	1 Dec – 31 March (4 months' cover)	£48.00
<input type="checkbox"/>	1 Jan – 31 March (3 months' cover)	£36.00
<input type="checkbox"/>	1 Feb – 31 March (2 months' cover)	£24.00
<input type="checkbox"/>	1 Mar – 31 March (1 months' cover)	£12.00

**Professional Indemnity and Public Liability cover:**

<input type="checkbox"/>	1 Apr – 31 March (12 months' cover)	£267.00
<input type="checkbox"/>	1 May – 31 March (11 months' cover)	£244.75
<input type="checkbox"/>	1 June – 31 March (10 months' cover)	£222.50
<input type="checkbox"/>	1 July – 31 March (9 months' cover)	£200.25
<input type="checkbox"/>	1 Aug – 31 March (8 months' cover)	£178.00
<input type="checkbox"/>	1 Sept – 31 March (7 months' cover)	£155.75
<input type="checkbox"/>	1 Oct – 31 March (6 months' cover)	£133.50
<input type="checkbox"/>	1 Nov – 31 March (5 months' cover)	£111.25
<input type="checkbox"/>	1 Dec – 31 March (4 months' cover)	£89.00
<input type="checkbox"/>	1 Jan – 31 March (3 months' cover)	£66.75
<input type="checkbox"/>	1 Feb – 31 March (2 months' cover)	£44.50
<input type="checkbox"/>	1 Mar – 31 March (1 months' cover)	£22.25

Total: £ \_\_\_\_\_

Payment method (circle)	CHEQUE	CREDIT CARD	INVOICE
If invoice, please provide Official Order Number: _____			
If credit card, please provide details			
Card number: _____		Expiry date: ____ ____	
Security code (3digits): ___			

**Please provide details of a referee we can contact to support your application.**

N.B. the referee must be either your Head of department, Head Teacher, Line Manager, LA officer or existing RDTHSC

Name: \_\_\_\_\_ Status: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Post code: \_\_\_\_\_

Contact telephone number: \_\_\_\_\_ Email: \_\_\_\_\_

**Please read the following statement and sign below to indicate your agreement:**

I have knowledge of the following key health and safety publications:

- D&T Association Health and Safety Training Standards in Design and Technology
- D&T Association Risk Assessment in Secondary School Design and Technology Environments
- BS4163:2007 Health and safety for design and technology in schools and similar establishments – Code of practice
- CLEAPPS Model Risk Assessments for Design and Technology

Following registration as a Registered Design and Technology Health and Safety Consultant I will:

- Agree to follow the RDTHSC Health and Safety Code of Practice
- Agree to attend a core training course and any other training courses needed

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

