APPLICATION FORM FOR APPROVAL AS AN

'IBT' TRAINING CENTRE PROVIDER



(PLEASE COMPLETE IN BLOCK CAPITALS)

1. ORGANISATION DETAILS

(Information provided may be subject to formal review at any time by RSA)

ADI REGISTRATION NUMBER: (if applicable) NAME:																		
(Person responsible for application/main contact person)																		
POSITION:																		
DATE:	Da	ay			Mor	nth			Y	ear								
REGISTERED COMPANY NAME:																		
REGISTERED COMPANY ADDRESS:																		
	_																	_
POSTAL ADDRESS: (If different from Registered Company Name)																		_
TELEPHONE NUMBER:																		
FAX NUMBER (if any):																		
EMAIL ADDRESS (if any):									1			1	-	1	-	 1		
WEB ADDRESS (if any):																		
OTHER RSA APPROVALS (ADI/CPC etc):																		
TAX REGISTRATION NUMBER:																		
(Please include a current tax clearance cer	tifica	te if	not	previ	ously	sup	olied))										
ORGANISATION TYPE:																		
CATEGORY OF TRAINING APPROVAL SOUGHT FOR (eg Motorcycles):																		
ACCREDITATIONS/AWARDS RECEIVED FOR DELIVERING TRAINING:	1																	
FOR DELIVERING TRAINING:	2																	
		•																
		•																_
	5	•																
DETAILS OF PROGRAMMES CURRENTLY BEING RUN:	1																	
COEliter Denio North	2	•																_]
	3																	_]
	4	•																



2. COMPANY INFRASTRUCTURE

STAFF	DETAILS:	

Trainers	ADI Registration Number
1.	
2.	
3.	
4.	
5.	

DETAILS OF TRAINING PREMISES TO BE US D (MOTORCYCLES):

Please be advised that the Applicant for IB T Approval is responsible for all permits (planning, etc.), providing insurance and will indemnify RA against any claims/accidents arising from use of said premises.

LOCATION OF FACILITY (Use separate sheet if required)

Location of facility	
Number of rooms	
Maximum Capacity	
Resources (e.g., LCD, TV, DVD Video etc.)	
Catering facilities	
Parking	

DETAILS OF VEHICLES TO BE USED: Complete one for each vehicle

VEHICLE 1:

Make:	NCT:	(if applicable)
Model:	Insurance:	
Year:	Tax:	

History (i.e., Accidents/damages):

VEHICLE 2:

	Make:	NCT:	(if applicable)
	Model:	Insurance:	
	Year:	Tax:	
- [

History (i.e., Accidents/damages):

VEHICLE 3:

Make:	NCT:	(if applicable)
Model:	Insurance:	
Year:	Tax:	

History (i.e., Accidents/damages):

VEHICLE 4:

Make:	NCT:	(if applicable)
Model:	Insurance:	
Year:	Tax:	

History (i.e., Accidents/damages):





3. CERTIFICATE OF TRAINING EXPERIENCE

TRAINER NAME:	
ADI CERTIFICATE NUMBER:	
NUMBER OF YEARS WITH THE COMPANY:	
MODULES THEY WILL BE FACILITATING:	
TRAINING /FACILITATION EXPERIENCE: (List experience in the relevant subject area)	Groups / One-on-One
DETAILS OF QUALIFICATIONS / PROGRAMMES COMPLETED: (List any courses/programmes completed in the relevant subject area)	1. 2. 3. 4. 5. 6. 7.
Please complete a Certificate of Experienc	e for EACH trainer who will be facilitating the approved syllabus for IBT.
RESOURCES AVAILABLE TO THE ORGANISATION (i.e., teaching aids, materials, equipment, etc.)	1. 2. 3. 4. 5.

4. COMPANY POLICY AND PROCEDURE DETAILS

(Please indicate the company's policy on the following. Please attach copies). If you require assistance with this please contact the Driver Education Section for details of requirements.

- 1. COMPLAINTS, APPEALS AND REFUNDS
- 2. DATA PROTECTION POLICY
- 3. ENVIRONMENT POLICY
- 4. EQUAL OPPORTUNITIES POLICY
- 5. HEALTH AND SAFETY POLICY
- 6. IT SYSTEMS
- 7. PROGRAMME DEVELOPMENT, DELIVERY AND REVIEW
- 8. QUALITY ASSURANCE
- 9. STAFF DEVELOPMENT
- 10. VETTING PROCEDURES FOR TRAINING STAFF



Páirc Ghnó Ghleann na Muaidhe, Cnoc an tSabhaircín, Bóthar Bhaile Átha Cliath, Béal an Átha, Co. Mhaigh Eo, F26 V6E4. Moy Valley Business Park, Primrose Hill, Dublin Road, Ballina, Co. Mayo, F26 V6E4. (096) 25 000 - info@rsa.ie

5. APPENDIX No.1: TERMS & CONDITIONS

Road Safety Authority - Approved Training Centres for IBT using the approved Syllabus - Terms and Conditions

- 1. If a training centre fails to comply with these terms and conditions, the Road Safety Authority may remove or suspend the approval status of the training centre with immediate effect.
- 2. Only those centres approved for delivery of the approved training syllabus are entitled to advertise their training provision as approved by the Road Safety Authority for IBT.
- 3. Training Centres must not continue to use the RSA branding in advertising after the approval period has lapsed. The Training Centre must apply at least three months prior to the final date of the approval period to ensure that the re-approval process is complete in advance of the termination of the initial approval period.
- 4. Only those centres approved for IBT are entitled to use the Road Safety Authority's ADI logo to advertise their IBT courses in accordance with the RSA ADI branding guidelines.
- 5. Training Centres must provide a single named contact responsible for the application. This contact will be the principal point of contact for all matters relating to the application / approval.
- 6. The Principal of the centre must sign a copy of this document signifying their acceptance of these Terms and Conditions on behalf of the training centre.
- 7. Applications for approval must be made in writing using the prescribed application form.
- 8. The Approved Centre must have a written procedure for dealing with complaints and refunds and must demonstrate how their clients are informed of both of these issues. They must also supply a copy of the various policies as detailed on section 4.
- 9. The Approved Centre must have a specified business address (P.O. boxes and mailing addresses are not acceptable for use in the list of approved centres) where training records are kept securely and for a period of at least six years.
- 10. Approved Centres may operate more than one site and each premise must have a specified address.
- 11. Where an Approved Centre operates at more than one location, they must ensure that systems are in place to ensure that a consistent high standard is delivered across all locations. They are responsible for maintaining standards across all registered sites. If the Road Safety Authority find any of the sites are operating in breach of the terms and conditions detailed in this document, the Road Safety Authority's reserves the right to remove or suspend the approval status of the training centre and its registered sites in accordance with the procedures outlined in this document.
- 12. The Road Safety Authority or its representatives reserve the right to visit an approved Training Centre at any reasonable time without prior notice. Unreasonable failure to facilitate such inspections may lead to removal from the list of approved centres.
- 13. As part of any audit visit, the Road Safety Authority or its representative shall be entitled to participate in any approved training module.
- 14. The approved centre must hold an up to date list of all trainers engaged in training in that centre, supported by documentary evidence of their appropriateness to deliver the modules of the syllabus (e.g. ADI Registration & IBT Approval).
- 15. An approved IBT Centre must continuously have the appropriate insurance in place in order for IBT courses to be delivered. This must include Public Liability and Professional Indemnity cover.
- 16. The Centres will not disclose to a third party, any information given by a trainee during training except where under obligation in law, or to a third party who is paying for a trainee's training but subject to the trainee's knowledge.
- 17. The Training Centre must comply with all current legislation particularly in respect of business premises and practice, staff, vehicles and public liability.
- 18. The Road Safety Authority reserves the right to add to or amend these requirements (giving three months notice) as necessary.
- 19. Each Centre must have the Certificate of approval on display at the training centre and available for inspection on request.
- 20. Where the Principal contact is not the Owner / Lease Holder of the property to be used for the provision of Initial Basic Training the declaration below must be completed by the Owner / Lease Holder before submitting the Application Form.

is true to the best of my knowledge. SIGNED: PRINT NAME: DATE: Day Month Year COMPANY STAMP: **Owner / Lease Holder Declaration:** hereby provide my consent for my property located at the address below to be used for the provision of Initial Basic Training: Address: OWNER / LEASE HOLDER SIGNATURE: PRINT NAME: WITNESSS SIGNATURE: PRINT NAME: DATE: Day Month Year COMPANY STAMP:

I confirm that I have read and accept the terms and conditions and that the information supplied in this document

Completed forms should be sent to:

IBT Applications, Driver Education Section, Road Safety Authority, Moy Valley Business Park, Primrose Hill, Ballina, Co. Mayo, F26 V6E4.



Údaras Um Shábháilteacht Ar Bhóithre

Road Safety Authority

Páirc Ghnó Ghleann na Muaidhe, Cnoc an tSabhaircín, Bóthar Bhaile Átha Cliath, Béal an Átha, Co. Mhaigh Eo, F26 V6E4.

Moy Valley Business Park, Primrose Hill, Dublin Road, Ballina, Co. Mayo, F26 V6E4.

(096) 25 000 info@rsa.ie www.rsa.ie

RSA.

MyRoadSafety.ie

Your online resource to easily and safely manage all your driver information, services, tests, permits and licences.