

# Step by Step Guide to submitting a Formal Academic Application NMPDU Cork/Kerry

## STEP 1: THE APPLICANT

1. Access the [NMPDU Cork Kerry Website](#)
2. Select Formal Academic Funding Application Form. **Please ensure all steps of the application are completed using the Adobe Acrobat Reader DC.**
3. It should look like this:

The screenshot shows the top portion of a PDF form. At the top left is the HSE logo and the text 'Aonad Pleanála & Forbartha Altranais & Cnámhseachais, Corcaigh & Ciarraí'. To the right is 'Nursing & Midwifery Planning & Development Unit, Cork & Kerry'. The main title is 'Postgraduate Education Funding Application Form'. Below this is a subtitle: 'Application for funding for Post Registration Education under the Sponsorship of Nursing/Midwifery Third Level Nursing Initiatives (HSE Circular 020/2014)'. A grey box contains several bullet points: 'This form must be opened in Adobe Acrobat (latest version of Adobe Acrobat can be downloaded by clicking the following link: https://get.adobe.com/uk/reader/)', 'Please read Guidelines for Funding Support for Continuing Professional Development for Nurses & Midwives - NMPDU Cork Kerry and Step by Step Guide prior to completing application.', 'Please note if all mandatory fields highlighted with a red border are not completed the form cannot be submitted by the Director of Nursing/Midwifery/Public Health Nursing/Director of Service to Nursing & Midwifery Planning & Development Unit (NMPDU)/Centre for Nursing & Midwifery Education (CNME) for review.', 'Please do not copy and paste onto this form.', 'Communication regarding your application will come from the following email: Therefore.Workflow@hse.ie', and 'Should you have any queries regarding completion of this form please email: NMPDUApplications.CorkKerry@hse.ie'.

4. Ensure all mandatory field are completed (highlighted in red)
5. Email your completed application to the Line Manager **as an attachment.**

## STEP 2: THE LINE MANAGER

6. Line Manager completes relevant section:

The screenshot shows a section titled 'Line Manager's Declaration of Understanding'. It starts with a checkbox and the text 'Please confirm you have had a discussion with the Applicant regarding this application'. Below this is a sub-section '4.2 I confirm that:' followed by five bullet points: 'the applicant has a satisfactory service record', 'the terms of the applicant's contract of employment allows them to fulfil the service commitment associated with sponsorship', 'the applicant is currently registered with the NMBI', 'the proposed Programme of study is relevant to the applicant's area of practice and/or', and 'the proposed Programme of study is aligned to patient/service needs'. There is another checkbox with the text 'By ticking this box I understand that I am confirming that the applicant meets the conditions above and I am recommending that the application for funding be endorsed by Director of Nursing/Midwifery/Public Health Nursing/Director of Service.' Below this is a note: 'Note to Line Manager: Please ensure applicant has completed all mandatory fields above prior to emailing this form to the Director of Nursing/Midwifery/Public Health Nursing/Director of Service as incomplete forms cannot be submitted for review. Please enter your name, date and contact details below.' The form then has several input fields: '4.3 First Name', '4.4 Surname', '4.5 Email Address', '4.6 Tel No', '4.7 Date' (with a note 'Note: please enter date in dd/mm/yyyy format'), '4.8 NMBI No (if applicable)', and '4.9 Title/Grade'.

7. Email application **as an attachment** to Director of Nursing/Midwifery/Head of Service/Designated Person

### **STEP 3: THE DIRECTOR OF NURSING/MIDWIFERY/HEAD OF SERVICE/DESIGNATED PERSON**

8. Complete relevant section as outlined below:

#### Section 5 - Director of Nursing/Midwifery/Public Health Nursing/Director of Service sign-off

Note to Director of Nursing/Midwifery/Public Health Nursing/Director of Service:  
Please enter your name, date and contact details below  
Click on the SUBMIT button  
When prompted please click Continue (this will generate an email with the form attached)  
Click send on email to forward the form to NMPDU/CNME for review. You will receive an acknowledgment email.

5.1 First name

5.2 Surname

5.3 Email Address

5.4 Tel No  5.5 Date

5.6 NMBI No (if applicable)  Note: please enter date in dd/mm/yyyy format

5.7 Title/Grade

Other, please specify

Director of Nursing/Midwifery/Public Health Nursing/Director of Service - Please click submit button below to send form to NMPDU/CNME for approval.

9. Hit **submit button** which will generate an automatic email with attached application and press send.

If the submit button **does not work** please check that all mandatory fields are complete. Ensure there are no spaces or incorrect symbols in text fields.

Should you have any queries please email: [NMPDUApplications.CorkKerry@hse.ie](mailto:NMPDUApplications.CorkKerry@hse.ie)