**ALPINE**

**Accredited Learning, Professional development and Innovation in Education**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## A1. ALPINE Registration for Professional Recognition

Please complete and submit this form to Alpine@uhi.ac.uk to register your interest in seeking professional recognition through ALPINE at UHI.

|  |
| --- |
| **1. About you** |
| **Your name** |  |
| **E-mail address** |  |
| **Job title**  |  |
| **Academic Partner or Institution (if external to UHI)** |  |
| **Gender** (stating this is entirely optional but will allow us to gauge gender representation in relation to participation in ALPINE) |  |
| **Intended recognition route**  |
| **Please indicate (x) the Recognition Route/category of HEA Fellowship you are registering for:** |
|  | Route 1 | Associate Fellow HEA through Learning and Teaching in HE module |
|  | Route 2 | Fellow HEA through Pg Cert Tertiary and Higher Education |
|  | Route 2 | Fellow HEA through Digital Pedagogy |
|  | Route 2  | Fellow HEA through Clinical Pedagogy |
| **Confirmation**  |
| **Please record below the date that you began studying (or will begin studying) and the first module of your studies.** |
| **Date:** |
| **First Module** |
|  |
| **If you know the order in which you will be taking the remaining two modules please name the modules in order of which module you will take next.** |
| **Second Module:** |
| **Third Module:** |
| **Please record any modules below that you have RPL (Record of prior learning)** |
|  |
|  | Agreement from your line manager to register for recognition through ALPINE |

If you have any queries before submitting this form, then

please e-mail the ALPINE co-ordinator at Alpine@uhi.ac.uk

Once your form is submitted we will aim to confirm next steps within two working weeks and provide you with a named ALPINE Mentor and access to the relevant forms and guidance in Mahara.