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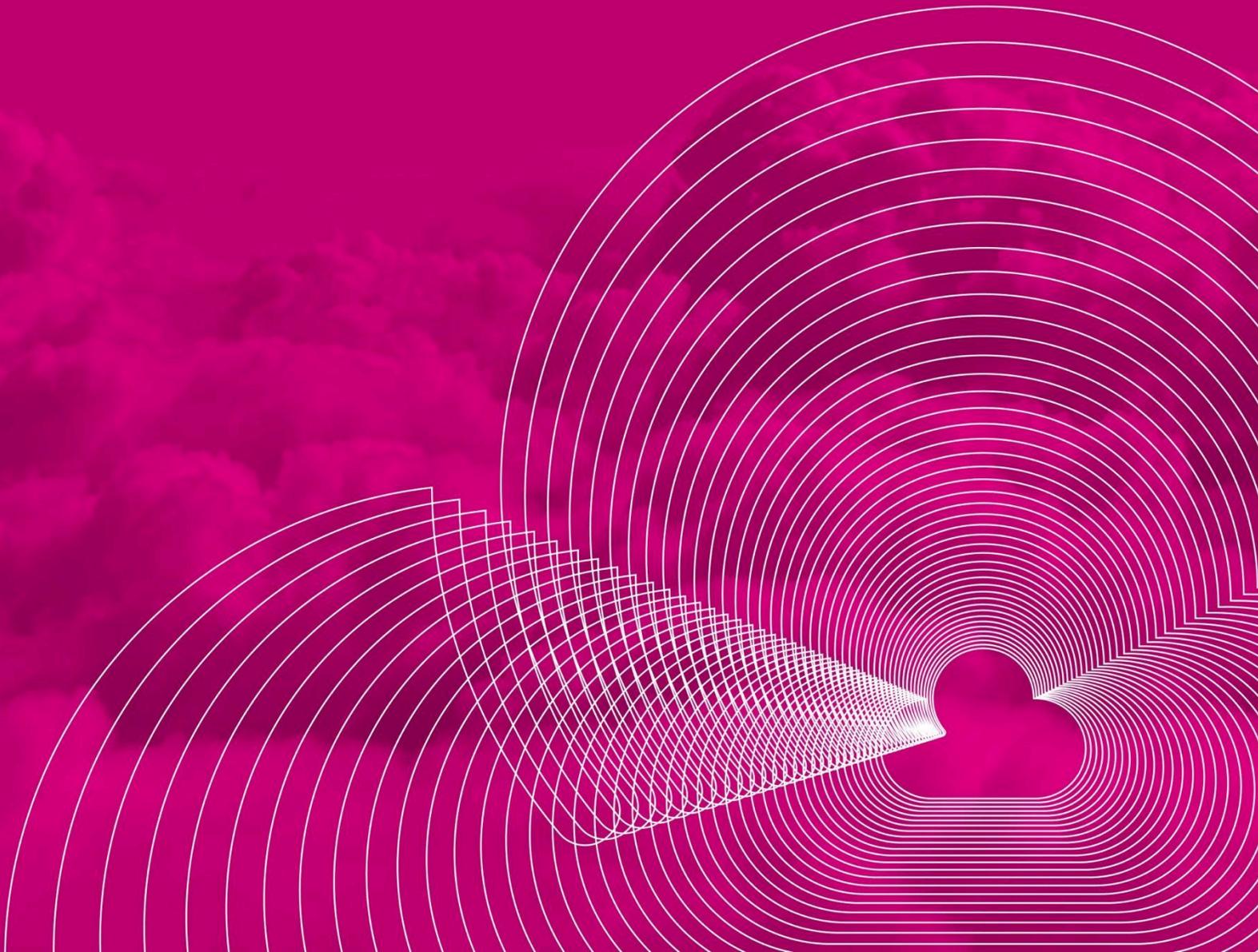
CORU

Registration Application

Example:

International Qualification Registration – Social Care Worker

User Guide



Introduction

This guide has been designed to walk through the steps of an International Qualification Registration – Social Care Worker application.

Read the Application Instructions and confirm that you have read the application guidance documentation related to this application pathway.

Note: A link to Registration Guidance Notes is available in the **Before You Begin** area.

Application Instructions

Note: All information with a red asterisk (*) is required.

Application Instructions

- Complete All Steps:** Fill out all required details as you go through each step of the application process. You will also need to upload documents at various stages, so please have them ready.
- Final Step - Fee Payment:** The last step of your application is to pay the application fee.

Before You Begin:

Please review our [Registration Guidance Notes](#) for detailed information on the application process, including required documents. **Note:** Only completed applications can be processed, please ensure to fill out all sections and upload all necessary documents.

Need Help? If you have any questions, feel free to contact us at registration@coru.ie.

Confirmation

I confirm that I have accessed and read the application guidance on the website related to the application pathway I have selected. *

[Save & Continue >](#)

Then click Save & Continue

Complete the Personal Information page

All Information with a red asterisk (*) is required.

Online Application

- Online Applications
- My Inbox
- Fees & Receipts
- Document Library
- Account Settings

- Application Type :
 - International Qualification Registration - Social Care Worker [1269]
- Application Instructions
- 3 Personal Information**
- 4 Eligibility Information

Personal Information

Note: All information with a red asterisk (*) is required.

Title *

First Name *

Do you have a surname? * Yes No

Professional Name *

Note: Please enter your full name, as you would like it printed on your registration certificate.

Previous Name (if any)

After entering all of your information, click **Save & Continue**

Opt In

- I confirm I would like to receive information about CORU's 2024 research survey "Health and Social Care Regulation Matters".
- I confirm I would like to subscribe to the CORU quarterly newsletter which provides regulation-related updates for Ireland's health and social care professionals.

Account Verification

What is your secret passphrase? *

Note: This will be used for identity verification purposes.

< Previous

Save & Continue >

Complete the Eligibility Information

The screenshot shows the 'Eligibility Information' page. On the left, a sidebar contains navigation links: 'Online Applications', 'My Inbox', 'Fees & Receipts', 'Document Library', and 'Account Settings'. Below these are application details: 'Application Type : International Qualification Registration - Social Care Worker [1269]', 'Application Instructions', and 'Personal Information'. The 'Eligibility Information' step is highlighted with a red box. The main content area has a header 'Eligibility Information' and a note: 'Note: All information with a red asterisk (*) is required.' Below this is a section 'Eligibility to practice' with two questions: 'In which country did you obtain your qualification? *' (with a search dropdown) and 'Is your profession or the education and training for your profession regulated in the country where you were awarded the qualification? *' (with radio buttons for 'Yes' and 'No'). At the bottom, there are '< Previous' and 'Save & Continue >' buttons, with the latter highlighted in red.

After entering all of your information, click **Save & Continue**

Complete the Languages of Professional Practice page

Please select the languages in which you practice your profession.

The screenshot shows the 'Language of Practice' page. The sidebar on the left is similar to the previous page, but the 'Language of Practice' step is highlighted with a red box. The main content area has a header 'Language of Practice' and instructions: 'Please select the languages in which you practice your profession. Please note if you do not meet the CORU Language Requirements, you will be required to provide evidence of competence in English or Irish from one of the IELTS, Cambridge, or Occupational English Test OET exams on the 'Supporting Documents' page of this application. Please visit the below link for more information on CORU's Language Policy: <https://coru.ie/health-and-social-care-professionals/registration/registration-requirements/language/>'. Below this is a text input field with the label 'Choose languages' and a red arrow pointing to it. At the bottom, there are '< Previous' and 'Save & Continue >' buttons, with the latter highlighted in red.

After entering all of your information, click **Save & Continue**

Complete the Qualification Information Page

Please provide your primary qualification in which you wish to be recognized. You may also wish to add additional qualifications, if relevant.

Click **+ Add New Records** to add new qualification information records.

Then enter all requested information such as Qualification Type, Institution Name, Education Details, Information, and Uploads.

After entering all of your information, click **Save & Continue**

Online Application

Online Applications
My Inbox
Fees & Receipts
Document Library
Account Settings

Application Type :
International Qualification
Registration - Social Care Worker
[1269]

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Eligibility Information
Language of Practice
6 Qualification Information
7 Research Information
8 Placement Information
9 Internship Information
10 Continuing Professional Development
11 Memberships

Qualification Information

Note: All information with a red asterisk (*) is required.

Please provide your primary qualification in which you wish to be recognised. You may also wish to add additional qualifications, if relevant.

Please note: for each qualification, you will be required to upload the following certified documentation:

1. Certificate of Award (English)
2. Course Curriculum Document (English)
3. Official Transcript (English)

In addition to the above, on submission of your application, you will be required to download a verification form for each qualification provided and remit the document to the educational institute for certification.

Qualification Type	Educational Institution	Title of Primary Qualification (in English)	Certificate Award Date
No records have been added. Click + Add New Records to add records.			

+ Add New Records

Save & Continue

After entering all of your information, click **Save & Continue**

Complete the Research Information Page

Click **+ Add New Records** to add research records.

Enter all requested information and click **Save & Continue** to record your entries.

The screenshot shows the 'Research Information' page. On the left, a sidebar contains navigation options: 'Online Applications', 'My Inbox', 'Fees & Receipts', 'Document Library', and 'Account Settings'. Below these are application type options: 'International Qualification Registration - Social Care Worker [1269]', 'Application Instructions', 'Personal Information', 'Eligibility Information', 'Language of Practice', and 'Qualification Information'. The '7 Research Information' option is highlighted with a red box. The main content area has a header 'Research Information' and a note: 'All information with a red asterisk (*) is required.' Below this is a question: 'Did you complete a research project/thesis as part of any qualification?' with 'Yes' selected. A table titled 'Provide details of your project/thesis.' has columns for 'Related Qualification', 'Project Title', and 'Number of Words'. The table is empty, with a message: 'No records have been added. Click + Add New Records to add records.' A red arrow points to the '+ Add New Records' button. At the bottom, there are '< Previous' and 'Save & Continue >' buttons, with the latter highlighted by a red box.

After entering all of your information, click **Save & Continue**

Complete the Placement Information Page

Click **+ Add New Records** to add clinical placement records.

Enter all requested information and click **Save & Continue** to record your entries.

The screenshot shows the 'Placement Information' page. The sidebar is similar to the previous page, but the '8 Placement Information' option is highlighted with a red box. The main content area has a header 'Placement Information' and a note: 'All information with a red asterisk (*) is required.' Below this is a question: 'Did you have a clinical placement(s) as part of your qualification(s)?' with 'Yes' selected. A section titled 'Placement Details' contains instructions: 'Please provide the details of placement information associated with the qualifications you are seeking recognition for. The practice/clinical placements must relate to the course of study for which you applied for recognition and must all be completed within the dates of this course.' and 'A new record must be added for each continuous block of placements. If the placement is broken up (i.e., by lectures or holidays), a new record must be created for each block.' A 'Please note' section states: 'On submission of your application, you will be required to download a verification form for each placement provided and remit the document to your education institution for certification.' Below this is a table with columns: 'Associated Qualification', 'Placement Provider's Name', 'Supervisor Name', 'Placement Mode', and 'Total Hours'. The table is empty, with a message: 'No records have been added. Click + Add New Records to add records.' A red arrow points to the '+ Add New Records' button.

After entering all of your information, click **Save & Continue**

Complete the Internship Information Page

Click **+ Add New Records** to add internship details.

Enter all requested information and click **Save & Continue** to record your entries.

Online Applications

My Inbox

Fees & Receipts

Document Library

Account Settings

Application Type :
International Qualification
Registration - Social Care
Worker [1269]

Application Instructions

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10 Continuing Professional
Development

11 Memberships

Internship Information

Note: All information with a red asterisk (*) is required.

Did you have an internship as part of your primary qualification? * Yes No

Internship Details

Please provide the details of any internships completed associated with your qualification.

Please note: For each internship, on submission of your application you will be required to download a verification form for each internship listed and email the document to your education institution for certification.

Qualification	Internship Location Name	Internship Mode	Total Hours
No records have been added. Click + Add New Records to add records.			

+ Add New Records

< Previous

Save & Continue >

After entering all of your information, click **Save & Continue**

Complete the Continuing Professional Development Page

Click **+ Add New Records** to add continuing professional development CPD activities relevant to your profession.

Enter all requested information and click **Save & Continue** to record your entries.

Online Applications

My Inbox

Fees & Receipts

Document Library

Account Settings

Application Type :
International Qualification
Registration - Social Care
Worker [1269]

Application Instructions

Personal Information

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Internship Information

**10 Continuing Professional
Development**

11 Memberships

Continuing Professional Development

Note: All information with a red asterisk (*) is required.

Do you have any continuing professional development (CPD) activities that are relevant to your profession? * Yes No

CPD Title	Type of Activity	Education Provider	Start Date	Completion Date	Duration (Hours)
No records have been added. Click + Add New Records to add records.					

+ Add New Records

< Previous

Save & Continue >

After entering all of your information, click **Save & Continue**

Complete the Memberships Page

Click **+ Add New Records** to add memberships with any regulatory or professional body. Enter all requested information and click **Save & Continue** to record your entries.

Online Applications
My Inbox
Fees & Receipts
Document Library
Account Settings

Application Type :
International Qualification
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Worker [1269]

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11 Memberships

12 Employment History
13 Verification Documentation

Memberships

Note: All information with a red asterisk (*) is required.

Do you have any memberships with any regulatory or professional body, or both? * Yes No

Please provide details of any membership with a competent authority, regulatory body or membership organisation.

Please note:
Include only memberships for a regulated profession, including old and expired memberships.
For each membership record, you will be required to upload the following documentation:
1. Certificate of Good Standing from the Regulatory Body / Competent Authority.
In addition to the above, on submission of your application, you will be required to download a verification form for each membership listed and remit the document to the appropriate competent authority / regulatory body for certification.

Regulatory or Professional Body	Registration Number	Initial Registration Date	Expiration Date
No records have been added. Click + Add New Records to add records.			

+ Add New Records

< Previous

Save & Continue >

After entering all of your information, click **Save & Continue**

Complete the Employment History Page

Please refer to the **Employment Section of the website link** on the page before completing the Employment History section of your application.

Click **+ Add New Records** to add relevant post-qualifying work experience.

Enter all requested information and click **Save & Continue** to record your entries.

Online Applications
My Inbox
Fees & Receipts
Document Library
Account Settings

Application Type :
International Qualification
Registration - Social Care
Worker [1269]

Application Instructions
Personal Information
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12 Employment History

13 Verification Documentation

Employment History

Note: All information with a red asterisk (*) is required.

Do you have relevant post-qualifying work experience? * Yes No

Please provide the details of any relevant work experience.

Please refer to the Employment Section of the [website](#) before completing the Employment History section of your application.

Self-employed	Employment or Contract Type	Start Date	End Date
No employment records have been added. Click +Add New Records to add a new employment.			

+ Add New Records

< Previous

Save & Continue >

Complete the Verification Documentation Page

The following sections are components of your recognition application that require verification. These documents must be received directly by CORU from the organisation / educational institution that is required to certify the document. After emailing the document, will respond to the e-mail with a confirmation of receipt. When the verification has been processed it will indicate so.

Please read the instructions on each generated verification document.

Download - Use the download button to generate a verification form to send to the appropriate party.

Verified? - "Yes" indicates this component has been verified and the Download button will no longer be available.

Verification Documentation

Recognition Verification Documents

The following sections are components of your recognition application that require verification. These documents must be received directly by CORU from the organisation / educational institution that is required to certify the document. After emailing the document, will respond to the e-mail with a confirmation of receipt. When the verification has been processed it will indicate so.

Please read the instructions on each generated verification document.

Download - Use the download button to generate a verification form to send to the appropriate party.

Verified? - "Yes" indicates this component has been verified and the Download button will no longer be available.

Verification of Competent Authority

Regulator / CA	Regulator Administrative E-mail	Registration Number	Verified?

Verification of Qualification

Educational Institution	Other Educational Institution	Qualification Title	Qualification Type	Certificate Award Date	Verified?

Verification of Employment

Employer Name	Job Title	Date From	Date To	Verified?

< Previous

Save & Continue >

After entering all of your information, click **Save & Continue**

Complete the Supporting Documents Page

Please check the **Registration Requirements webpage** linked on the page for information on certifying your documentation.

All documents must be certified correctly to ensure your application can be processed. Please upload relevant documentation for the required documents.

Supporting Documents

Note: Please check the [Registration Requirements webpage](#) for information on certifying your documentation. It is important that all documents are certified correctly to ensure that your application can be processed.

Certified Statutory Declaration*

Please upload a certified copy of a Statutory Declaration.

Certified Copy of ID*

You are required to provide a certified copy of one of the following:

- Current Passport photo page; or
- Both sides of current Passport card; or
- New Irish driving licence (Issued since 2013); or
- Public Services Card (both sides), as issued by Department of Social Protection.

Proof of Address*

Please upload a copy of one of the following, issued and dated within the last 6 months:

- Recent utility bill (gas, phone, broadband or electricity);
- Statement of result of correspondence from your college, university or SUSI (<https://susl.ie/>);
- Bank/building society/credit card or credit union statement;
- Document from state agency showing your current address (Tax related document).

Criminal Clearance Certificate

14 Supporting Documents

15 eVetting Form

After uploading your information, click **Save & Continue** at the **bottom of the page**.

Complete the eVetting Page

Please download and complete the eVetting Information Form linked on the page. Please then upload the completed, signed, and dated form.

eVetting Form

Note: All information with a red asterisk (*) is required.

eVetting with the National Garda Vetting Bureau is a requirement.

Each applicant must complete an eVetting Invitation Form as part of their application.

Please download and complete the [eVetting Invitation Form](#) and upload as part of this step of the application.

After submission of this application, within 1 week you will receive an e-mail inviting you to apply for eVetting. Follow the link in the e-mail to complete the application online. You will be notified by e-mail when the eVetting outcome has been received by CORU.

Please upload the completed, signed, and dated by hand (using a ball point pen) eVetting invitation form. *

I have provided documentation to validate my identity as required and I consent to the making of this application and to the disclosure of information by the National Vetting Bureau to the Liaison Person pursuant to Section 13(4)(e) of the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016. *

After entering all of your information, click **Save & Continue**

Complete the Fit and Proper Survey page

Fit and Proper Survey

By law, before your name can be entered on the Register for your profession, you must satisfy the Board that you are a fit and proper person to engage in the practice of the profession. This includes information on your health and character.

If you have a physical or mental health condition that may affect the practice of your profession you must give full details. This does not necessarily make you ineligible for registration. It is an opportunity for you to demonstrate how you manage your health issues and how this enables you to provide safe service to service users. Failure to give us relevant and accurate information may affect your application for registration.

Please note that you may wish to refer to the [Criminal Justice \(Spent Convictions and Certain Disclosures\) Act 2016](#).

Note: All information with a red asterisk (*) is required.

1. Do you have or have had in the past any physical health or mental health condition that may affect your ability to practise the profession for which you seek registration? *

Yes No

2. Have you ever been treated for alcohol or drug dependency?*

Yes No

After entering your responses, click **Save & Continue** at the **bottom of the page**.

Complete the Fit and Proper Survey – Residency page

Have you ever lived outside Ireland for at least one year and one day, since 18 years old?

If not, select the **No** option then click **Save and Continue** at the bottom of the page.

If yes, select the **Yes** option and click **+ Add New Records** to add Residency information. Enter all requested information and click **Save & Continue** to record your entries.

Fit and Proper Survey - Residency

Note: All information with a red asterisk (*) is required.

Have you lived outside of Ireland for at least one year and one day, since 18 years old? *

Yes No

Residency Information

Please provide details on each country where you have lived outside Ireland for at least one year and one day or longer since the age of 18. You will be required to provide certified copies of certificate(s) of criminal clearance for each country. You are not required to report the same country twice.

Note: Information on Police Clearance requirements can be found on [CORU Police Clearance](#) page.

Country	Start Date	End Date	Clearance Body	Clearance Issue Date
No records have been added. Click + Add New Records to add records.				

 **+ Add New Records**

[< Previous](#) [Save & Continue >](#)

After entering all of your information, click **Save & Continue**

Complete the Attestation page

Attestation

Kindly attest to the following:

Note:

All information with a red asterisk (*) is required.

- I declare that the information entered in the application form and in all attached documentation is true and accurate.*
- I declare that I am eligible to practice my profession in the country where my primary professional qualification was obtained.*
- I understand that failure to disclose full information or any deliberate misrepresentation of information is a serious matter and will invalidate my application.*
- I understand that I may be required to submit further documentary evidence or information in support of any particulars given by me on my application form.*
- I undertake that any such further documentary evidence or information in support of any particulars given by me on my application form shall be true and accurate.*
- I understand that any false, misleading or incomplete information submitted by me will result in the revocation of my application or decisions made in respect of my application.*
- I agree to notify CORU in writing, of any change of personal details during the application process, e.g. change of last name or address, as and when such changes occur.*
- I confirm that I have read and understood the [Guidance Notes](#) in completing this application.*

After making your attestations, click **Save & Continue** at the **bottom of the page**.

Complete the Payment Page

Fee Breakdown will appear on the page.

Please select your method of payment.

The screenshot shows the CORU online application interface. On the left, there is a sidebar with navigation options: Online Applications, My Inbox, Fees & Receipts, Document Library, and Account Settings. Below these are application details: Application Type (International Qualification Registration - Social Care Worker [1269]), Application Instructions, and a list of steps from Personal Information to Attestation. The '19 Payment' step is highlighted with a red box. The main content area is titled 'Payment' and includes a 'Fee Breakdown' table with two items: 'Social Care Worker - Recognition S38 Registration Fee' and 'Social Care Worker - Recognition S38 Application Fee'. Below the table is a 'Method of Payment' section with a dropdown menu currently set to 'Select...'. A red box highlights this dropdown. A '< Previous' button is visible at the bottom left of the main content area.

- **Bank Card** – Please complete all billing information.

Please note that we can only accept fees to be paid online by bank card. By clicking 'Process Payment' you will be taken to our payment processing page.

If you encounter any issues please contact us at registration@coru.ie.

This close-up shows the 'Method of Payment' section. It contains the same explanatory text as the previous screenshot. Below the text is a dropdown menu with 'Bank Card' selected, indicated by a red arrow. At the bottom left, the 'Process Payment >' button is highlighted with a red box.

- **Check** – Please send your check to the address listed on the screen and click **Pay by Check/money order**.

Method of Payment

Amount Due

Check payment
Please send check to below address:

CORU - Regulating Health & Social Care Professionals
Infinity Building, George's Court, George's Lane
Smithfield, Dublin D07 E98Y

< Previous Pay By Check/money order >

Application Submission

Shortly after processing your payment method your application will be submitted and a **Submitted** banner will appear on the screen.

✓ **Submitted**

Thank you for completing your application. CORU will only start processing your application once all the required documents have been received, including any verification documents, if applicable.

To view the status of your application, please refer to the [Online Applications](#) section.

Note: Verification documents, if applicable, can be generated by visiting Online Applications -> Documents.

To view your payments, please refer to the [Fees & Receipts](#) section.