

## Level 4 Certificate in Community Development

### Description

This course examines the purposes and functions of community development work and identifies the knowledge, skills and resources required for good practice in this area. An understanding of the following will be developed — networking, research, strategic planning, partnership, marginalisation, inclusion, participation, funding mechanisms, publicity, sustained development, facilitation, individual and group needs. Emphasis will be on empowerment of communities. Knowledge of the significance of cultural diversity, alternative values and principles of community development work will enable learners to apply their understanding and skills within a community setting.

### Summary of learning outcomes

To achieve this unit a learner must:

1. Examine definitions of **community and community development**
2. Identify and explain **knowledge and skills requirements** in community development
3. Analyse how the community development worker facilitates the **development of community initiatives**
4. Evaluate the impact of project work on communities.

#### Course Topics

- **Communities and community development**
  - Communities
  - Community support mechanisms
  - Marginalisation
- **Knowledge and skills requirements**
  - Initiation of community relationships
  - Information and research
  - Proposals and Grant Writing
- **Development of community initiatives**
  - Contributions of community development worker
  - Sustainability
- **Impact of project work on communities**
  - Effects
  - Barriers
  - Overcoming barriers

**Target Group:**

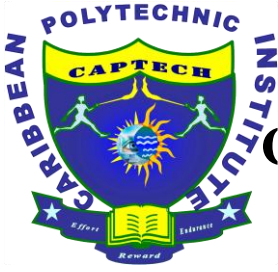
**Cost:** \$25,000.00

**Registration Fee:** \$1,000.00

**Duration:** 8 weeks

**Start Date:** (See Calendar for date and time)

**For more information Contact:**  
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Tel: 765-2471; Mobile: 366-5375  
email: [info@captech.edu.jm](mailto:info@captech.edu.jm)  
Web: [www.captech.edu.jm](http://www.captech.edu.jm)



# CARIBBEAN POLYTECHNIC INSTITUTE

## Registration Form

- |  |  |
|--|--|
| <input type="checkbox"/> Advanced Business Administration                  | <input type="checkbox"/> Environmental Management Food Safety Principles and Practices |
| <input type="checkbox"/> Facility Management                               | <input type="checkbox"/> Horticulture and Landscape Maintenance                        |
| <input type="checkbox"/> Quantity Surveying                                | <input type="checkbox"/> Diploma in Teaching and Training                              |
| <input type="checkbox"/> Business Studies                                  | <input type="checkbox"/> Marketing and Sales   |
| <input type="checkbox"/> Building Infrastructure and Utilities Maintenance | <input type="checkbox"/> Project Management (PMP)                                      |
| <input type="checkbox"/> Construction Project Management                   | <input type="checkbox"/> Environmental Science   |
| <input type="checkbox"/> Contract Administration                           | <input type="checkbox"/> Inventory Management  |
| <input type="checkbox"/> Media (Journalism)                                | <input type="checkbox"/> Operations Management   |
| <input type="checkbox"/> Customer Service                                  | <input type="checkbox"/> Urban Integrated Pest Management                              |
| <input type="checkbox"/> Ecotourism  | <input type="checkbox"/> Other _____   |
| <input type="checkbox"/> Disaster Management                               |  |
| <input type="checkbox"/> Rural Planning and Development                    |  |
| <input type="checkbox"/> Land Use Issues and Policies                      |  |

### Personal Data

Company Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Nos. Work \_\_\_\_\_ Home \_\_\_\_\_ Cel \_\_\_\_\_

### Summary of Education and Work Experience

1. Education: \_\_\_\_\_

2. Work Experience: \_\_\_\_\_

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

### Next of Kin

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone Nos. Work \_\_\_\_\_ Home \_\_\_\_\_ Cel \_\_\_\_\_

### **FOR OFFICE USE ONLY**

Full Tuition Paid \$ \_\_\_\_\_ Date Received \_\_\_\_\_

Summary of Financial Status \_\_\_\_\_

Signature of Participant \_\_\_\_\_ Officer's Signature \_\_\_\_\_

*Please copy if additional forms are needed*