 **Adult Community Learning Service**



**Enrolment Form 2016/17**

*This activity is supported by the Isle of Wight Council and the Skills Funding Agency*

**Please complete all boxes in ink and CAPITAL LETTERS**

Please note that unless otherwise stated, **all** sections within this enrolment form **must** be completed as fully and accurately as possible. This is to ensure that the Skills Funding Agency, and in turn the Isle of Wight Council, are able to release funds for the learners and programmes and therefore deliver the courses.

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| **Title (please circle)** | Mr Ms Miss Mrs Dr Other | | **Gender:** |  | |
| **First Name:** |  | | **Middle Name: (optional)** |  | |
| **Last Name:** |  | | **Date of Birth:** |  |  |
| **Home Address** |  | | | | |
|  | | **Post Code:** |  | |
| **Contact Telephone Number(s):** | |  | | | |
| **Email address:** | |  | | | |
| **Emergency Contact Details:** | | **Name:** | | | |
| **Contact Number:** | | | |

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| **Please tick the box that you feel describes your ethnic origin:** | | | | |
| *White* | |  | *Asian or Asian British* | |
| British |  |  | Indian |  |
| Irish |  |  | Pakistani |  |
| Gypsy or Irish Traveller |  |  | Bangladeshi |  |
| Other white **\*** |  |  | Chinese |  |
| *Mixed* | |  | Other Asian **\*** |  |
| White & Black Caribbean |  |  | *Black or Black British* | |
| White & Black African |  |  | African |  |
| White & Asian |  |  | Caribbean |  |
| Other mixed / multiple ethnicity **\*** |  |  | Other Black / African / Caribbean \* |  |
| *Other ethnic group* | |  | ***\**** *If 'other', please state:* | |
| Arab |  |  |
| Other ethnic group \* |  |  | Prefer not to say |  |
| If English is not your first language, please state your first language: | | | | |

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| **Do you consider yourself to have a learning difficulty or disability?** | | | | Yes\* / No | \*If yes, please tick all that apply below | |
| Multiple learning difficulties |  |  | Asperger’s syndrome | | |  |
| Autism spectrum disorder |  |  | Profound complex disabilities | | |  |
| Dyscalculia |  |  | Temporary disability after illness or accident | | |  |
| Dyslexia |  |  | Mental health difficulty | | |  |
| Severe learning difficulty |  |  | Other medical condition, e.g. epilepsy/asthma | | |  |
| Moderate learning difficulty |  |  | Emotional or behavioural difficulties | | |  |
| Speech, Language and communication needs |  |  | Other specific learning difficulty | | |  |
| Social and emotional difficulties |  |  | Other disability | | |  |
| Disability affecting mobility |  |  | Other physical disability | | |  |
| Hearing impairment |  |  | Other, please state: | | | |
| Visual impairment |  |  |
| Multiple disabilities |  |  | Prefer not to say | | |  |
| Please state your primary learning difficulty or disability: | | | | | | |

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| **Qualifications: Please tick the box that best describes your highest level of qualification** | | | | | | | | |
| None | *No formal qualifications* | | | | | | |  |
| Entry level | *Entry level certificates / ESOL Skills for Life / Functional skills (at Entry level)* | | | | | | |  |
| Qualification(s) below level 1 | | | | | | | |  |
| Level 1 | *NVQ level 1 / GCSEs or O levels - 5 or more grade D-G, or less than 5 grade A* | | | | | | |  |
| Full level 2 | *NVQ level 2 / 5 or more GCSEs or O levels grade A\*-C / 2 AS levels / one A level* | | | | | | |  |
| Full level 3 | *NVQ level 3 / 2 or more A levels / GNVQ Advanced Diploma* | | | | | | |  |
| Level 4 | *QCF level 4 / HNC / Certificate of Higher Education* | | | | | | |  |
| Level 5 | *QCF level 5 / HND / Foundation degree* | | | | | | |  |
| Level 6 | *QCF level 6 / Batchelor degree / Graduate certificate / Graduate diploma* | | | | | | |  |
| Level 7 or above | *QCF level 7 or 8 / Masters degree / Postgraduate certificate /diploma / Doctorate* | | | | | | |  |
| **Please also tick if you have either of the following:** | | | | | | | | |
| GCSE English (grade C or above), or equivalent | | | | | | | |  |
| GCSE Maths (grade C or above), or equivalent | | | | | | | |  |
| **When did you last participate in a formal education course over 20 hours long?** **(please tick)** | | | | | | | | |
| 0-3 years ago | |  | 3-5 years ago |  | 6-10 years ago |  | Over 10 years |  |

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| **Employment Status: Please tick the box which best describes your current status** | | | | | | |
| In full time education |  | Volunteering | |  | Self-employed |  |
| Home Maker / Carer |  | Unemployed - seeking work | |  | Employed |  |
| Retired |  | Unemployed - not seeking work | |  |  | |
| **How long has this status applied?** **(please tick)** | | | | | | |
| Up to 3 months |  | 7 to 12 months | |  | 24 to 35 months |  |
| 4 to 6 months |  | 12 to 23 months | |  | Over 36 months |  |
| **If you are currently employed or self-employed how many hours per week do you work? (please tick)** | | | | | | |
| Less than 16 hours |  | | 16 to 19 hours |  | 20 hours plus |  |

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| **Benefits: Are you in receipt of a state benefit?** | Yes\* / No | \*If yes, please tick below | |
| Job Seeker’s Allowance (JSA) | | |  |
| Employment and Support Allowance (ESA) in the work related activity group | | |  |
| Universal Credit (because you are unemployed, and are required to undertake skills training) | | |  |
| Personal Independence Payment | | |  |
| Pension Credit Guarantee | | |  |
| **Evidence Seen by Tutor (if applicable for concessionary fees)** | **(Tutor Signature)** | | |

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| **Household Situation: Please tick which of the following statements apply (one of more may apply)** | |
| No member of the household in which I live (including myself) is employed |  |
| The household that I live in includes only one adult (aged 18 or over) |  |
| There are one or more dependent children (aged 0-17 years or 18-24 years if full-time student or inactive) in the household |  |
| None of these statements apply |  |
| I confirm I wish to withhold this information |  |

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| *Multimedia Use* | | | | | | | |
| *I give permission for photographs, other media footage, or recordings to be used by the Adult Community Learning Service for the purpose of: (please tick all that apply)* | | | | | | | |
| Assessment of my learning |  | Websites |  | Displays |  | Publications |  |

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| **Course/s Requested:** **I wish to be enrolled on the following course/s:** | | | | |
| Course Title | Start Date | Fee (£) | Have you enrolled on this subject before? | *Office Notes* |
|  |  |  | Yes\* / No |  |
|  |  |  | Yes\* / No |  |
|  |  |  | Yes\* / No |  |
|  |  |  | Yes\* / No |  |
|  |  |  | Yes\* / No |  |
| \*If yes please give details of the qualification(s), level or units passed: | | | | |

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| **How We Use Your Personal Information** | | | | | | | | | | | | | |
| The information you provide will be used by the Isle of Wight Council and External Agencies such as the Skills Funding Agency and National Careers Service for data analysis, to support the learning assessment process and to inform future planning. These organisations are registered under the Data Protection Act 1998.  The personal information you provide is passed to the Chief Executive of Skills Funding (“the Agency”) and, when needed, the department for Education, including the Education Funding Agency and the European Social Fund (ESF) to meet legal responsibilities under the Apprenticeships, Skills, Children and Learning Act 2009, and the Agency’s Learning Record Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for education, training and employment – related purposes, including for research. Further information about use of and access to your personal data, and details of partner organisations are available at: www.gov.uk/government/organisations/skills-funding-agency | | | | | | | | | | | | | |
| **Declaration and Learning Agreement** | | | | | | | | | | | | | |
| **Eligibility**  To be eligible for funding a learner must be a citizen of the United Kingdom and Islands or the European Economic Area (EEA), and have been ordinarily resident in the United Kingdom and Islands or the European Union (EU) or the European continuously for at least the past three years.  **Expectations**  *What you can expect from us:*  The Adult Community Learning service will provide a variety of affordable and accessible courses that will assist with employability skills, promote social inclusion and widen participation in lifelong learning. Our programme will include taster sessions, workshops and academic term based learning to offer something for all over 19 year olds. Working in partnership with the Isle of Wight Council and other organisations to provide a safe, well equipped and friendly learning environment. Each learner will be treated fairly, with respect, courtesy and as an individual by the Tutor. All learners will receive a high standard of teaching with regular feedback on their work and progress, and will be assisted in achieving their agreed outcome. Learners will also receive free and impartial information and advice on your next steps. If you do not attend a class within a multi-week course (without prior arrangements) you will be contacted to check that you are happy to stay on the course and still require the space.  *What we can expect from you:*  To get the best from your learning you will be expected to adhere to this learner agreement and the Adult Community Learning service’s Learner Charter which is available to view under the Adult Community Learning Service information on www.iwight.com. You will also be expected to attend your course (regularly if multi-week) and arrive on time. The tutor must be notified as soon as possible if you are unable to attend or if we can help, if you need to change or leave your course. During your learning experience you must behave responsibly and politely, treating everyone with respect. You must follow health and safety procedures and take care of property, equipment and ICT facilities. All learners have to refrain from smoking, or consuming alcohol or illegal substance on any Adult Learning premises. If appropriate you will need to complete a learning plan with your tutor so we can best support your progress in learning, follow the ICT terms of use and adhere to rules during exams.  **Declaration**  I have read the statements above and agree that the information I have provided can be used by the Isle of Wight Council as stated. I certify that all the information is true and accurate to the best of my knowledge. I understand that if I have declared false information the provider may take action against me to reclaim tuition fees and any support costs.  Unless otherwise stated, I have been a resident of the UK/EU/EEA for a minimum of 3 years.  I agree to adhere to the expectations of the Adult Community Service as described above and in their Learner Charter. | | | | | | | | | | | | | |
|  | **Signed:** |  | | | | |  | | **Date:** |  | | |  |
|  |  | | | | | |  | |  |  | | |  |
| **I am happy to be contacted: (please tick all that apply)** | | | | | | | | | | | | | |
| By Post | |  | By email |  | By phone |  | | About courses and Learning Opportunities | | |  | For surveys and research |  |



The European Union is committed to creating more and better jobs, a socially inclusive society and sustainable growth in the EU. The ESF is the European Union's main financial instrument for investing in people and it spends over 10 billion a year across all Member States.

In the UK the Skills Funding Agency manages the European Social Fund provision that is designed to improve the skills of the workforce, improve job prospects, and to help people who have difficulties finding work.