

ENROLMENT FORM AND LEARNING AGREEMENT 2011/2012

Please complete in BLOCK CAPITALS

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ULN Number:

Learner ID:

SECTION 1 – Your personal details (Evidence will be required to complete your enrolment - passport, ID card etc.)

Ms/Miss/Mrs/Mr*	Male/Female*	Home Telephone Number:
First Names:		Work Telephone Number:
Family Name/Surname:		Mobile Telephone Number:
Email:		
Address:		
		National Insurance number:
Postcode:		Date of Birth: DD / MM / YYYY

Course(s) that you wish to enrol on

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Course	Course code	Course Title	Fee Payable
Course 1			£ . p
Course 2			£ . p
Course 3			£ . p
Course 4			£ . p
Course 5			£ . p
Course 6			£ . p
Total:			

For Family Learning Courses Only

Name of child	Date of Birth	Learner ID

Emergency contact - (This should be someone aged over 18)

Name	Relationship	Contact Number

Your Residential Status

What is your nationality (on your passport)?

Have you been resident in the UK since 1st September 2008? Yes No* ***Date of entry:** DD / MM / YYYY

Have you been resident in the EU/EEA since 1st September 2008? Yes No

Which EU/EEA country are you from?

Are you an EU/EEA national or the spouse or child of such a national? Yes No*

Please tick if you are

A Refugee

An Asylum Seeker

Other (Please specify):

Please tick if you have

Humanitarian Protection

Discretionary Leave

Exceptional Leave to enter or remain in the UK

Please bring evidence of your status when enrolling

Learner Status: Home

Overseas

Evidence seen: Yes No

Initials

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SECTION 2 - Your Ethnic Origin, Faith and Sexuality

Which of the following best describes your ethnic origin? <small>(please tick box)</small>		What is your Faith? <small>(please tick box)</small>	
31	<input type="checkbox"/> White - British / Scottish / Welsh / English / Northern Irish	BU	<input type="checkbox"/> Buddhist
32	<input type="checkbox"/> White - Irish	CH	<input type="checkbox"/> Christian
33	<input type="checkbox"/> White - Gypsy or Irish Traveller	HI	<input type="checkbox"/> Hindu
34	<input type="checkbox"/> White - Other	JE	<input type="checkbox"/> Jewish
35	<input type="checkbox"/> Mixed - White & Black Caribbean	MU	<input type="checkbox"/> Muslim
36	<input type="checkbox"/> Mixed - White & Black African	SI	<input type="checkbox"/> Sikh
37	<input type="checkbox"/> Mixed - White & Asian	NF	<input type="checkbox"/> No Faith
38	<input type="checkbox"/> Mixed - Other	OT	<input type="checkbox"/> Other
39	<input type="checkbox"/> Asian or Asian British - Indian	PM	<input type="checkbox"/> Prefer not to say
40	<input type="checkbox"/> Asian or Asian British - Pakistani		
41	<input type="checkbox"/> Asian or Asian British - Bangladeshi		
42	<input type="checkbox"/> Chinese		
43	<input type="checkbox"/> Asian or Asian British - Other		
44	<input type="checkbox"/> Black or Black British - African		
45	<input type="checkbox"/> Black or Black British - Caribbean		
46	<input type="checkbox"/> Black or Black British - Other		
47	<input type="checkbox"/> Arab		
29	<input type="checkbox"/> Somali		
28	<input type="checkbox"/> Vietnamese		
48	<input type="checkbox"/> Any other ethnic group		

SECTION 3 - Please tell us the level of qualifications you already hold. Please tick all the boxes that apply

	<input type="checkbox"/> No qualification		99
Entry Level	<input type="checkbox"/> Any entry level qualification <input type="checkbox"/> Any other qualification below level 1		09
Level 1	<input type="checkbox"/> More than 1 GCSE/GCE/CSE/O Level (grades D-G or fewer than 5 at grade A-C) <input type="checkbox"/> GNVQ foundation <input type="checkbox"/> BTEC First certificate	<input type="checkbox"/> RSA certificate <input type="checkbox"/> CACHE getting started <input type="checkbox"/> Other	01
Level 2	<input type="checkbox"/> 5 or more GCSE/CSE/O Level (Grades A-C) <input type="checkbox"/> NVQ Level 2 <input type="checkbox"/> Edexcel first diploma, BTEC or ITEC first or general diploma <input type="checkbox"/> Any OCR/RSA diploma	<input type="checkbox"/> 2 or more AS levels <input type="checkbox"/> 1 GCE A level <input type="checkbox"/> Any other full level 2 qualification <input type="checkbox"/> Other	02
Level 3	<input type="checkbox"/> 2 or more A Levels <input type="checkbox"/> NVQ Level 3 <input type="checkbox"/> Edexcel/BTEC/OCR/national certificates and diplomas <input type="checkbox"/> RSA stage 3 advanced	<input type="checkbox"/> GNVQ Advanced <input type="checkbox"/> Advanced/Higher awards or diplomas <input type="checkbox"/> Other	03
Level 4	<input type="checkbox"/> Teaching qualifications (including PGCE) <input type="checkbox"/> Higher Education certificate/diploma <input type="checkbox"/> NVQ Level 4 <input type="checkbox"/> First Degree (or Higher degree)	<input type="checkbox"/> BTEC National HNC/HND <input type="checkbox"/> Nursing (SRN) <input type="checkbox"/> Other	04
Level 5	<input type="checkbox"/> Masters		05

SECTION 4 Impairments and learning needs

By disclosing your impairment the Idea Store Learning can provide support to meet your needs.

The information provided in this section will be treated in confidence and will only be shared with relevant staff. The Learner Support Team will contact you to discuss your needs.

Do you have an impairment that you feel we need to know about?

If so, please tick the relevant box(es)

No, I do not have an impairment

Sensory:		Medical condition:	
Sight	01 <input type="checkbox"/>	Asthma	05 <input type="checkbox"/>
Hearing	02 <input type="checkbox"/>	Epilepsy	05 <input type="checkbox"/>
Physical:		Diabetes	
Wheelchair user	03 <input type="checkbox"/>	Aspergers Syndrome	10 <input type="checkbox"/>
Mobility impairment	03 <input type="checkbox"/>	Profound Complex Difficulties	09 <input type="checkbox"/>
Other	04 <input type="checkbox"/>	Multiple Impairments	90 <input type="checkbox"/>
Learning:		Temporary impairment after illness - please specify:	
Dyslexia	10 <input type="checkbox"/>		08 <input type="checkbox"/>
Dyscalculia	11 <input type="checkbox"/>		
Autism Spectrum Disorder	20 <input type="checkbox"/>	Mental health – environmental impairment:	
Multiple learning difficulties	90 <input type="checkbox"/>	Mental health issues	07 <input type="checkbox"/>
Other	97 <input type="checkbox"/>	Emotional behavioural difficulties	06 <input type="checkbox"/>

SECTION 5 - Employability and Household Income

What is your current employment status?		What is your current household income?	
04	<input type="checkbox"/> Student	If Unemployed,	
01	<input type="checkbox"/> Employed	01	<input type="checkbox"/> less than 6 months
04	<input type="checkbox"/> Retired	02	<input type="checkbox"/> 6 - 11 months
04	<input type="checkbox"/> Unemployed	03	<input type="checkbox"/> 12 - 23 months
98	<input type="checkbox"/> Other	04	<input type="checkbox"/> 24 - 35 months
	<input type="checkbox"/> Prefer not to say	05	<input type="checkbox"/> Over 36 months

Staff:

Store:

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SECTION 6 - Marketing and Surveys

The SFA values your views on the education or training which you receive, and will use these to help bring about improvements for learners in England.

I can be contacted by: Post Telephone E-mail

How did you hear about the course? (Please only select one answer that best describes how you heard about the course)

18	<input type="checkbox"/> Learn in London Website	03	<input type="checkbox"/> Idea Store	12	<input type="checkbox"/> Poster/Flyer/Advert
07	<input type="checkbox"/> Learning Ladder Website	05	<input type="checkbox"/> Library	01	<input type="checkbox"/> Course Guide
19	<input type="checkbox"/> Idea Store Website	04	<input type="checkbox"/> Hotcourses		<input type="checkbox"/> Other (Please specify):

Tick this box if you **do not wish** to be contacted by Idea Store Learning, Skills Funding Agency (SFA) or its partners in respect of surveys and research, courses or learning opportunities.

SECTION 7 - Payment for your course

If you are applying for a fee concession

Please tick the box to indicate the reason for your request for fee concession.

Receiving Job Seekers Allowance, Employment Support Allowance or Income Support	First Full Level 2 or First Full Level 3	Working Tax Credit (Were total household income is less than £15,276 on TC602)	Pension Guarantee Credit	Asylum Seeker	Unwaged Dependant
<input type="checkbox"/> 15	<input type="checkbox"/> 22	<input type="checkbox"/> 04	<input type="checkbox"/> 23	<input type="checkbox"/> 14	<input type="checkbox"/> 08

■ Please bring evidence when enrolling.

If you are paying by instalments

First Payment £ Final Payment £

If your employer is paying

Is your employer paying your fees for you? Yes No

There are no concession entitlements, employers will be invoiced at the standard fee

Please provide a letter confirming your employer is paying your fees and complete the details below.

Name of Employer Phone Number

Address

Postcode

■ If your employer does not pay your fees, you will become liable for any outstanding balance regardless of whether you complete the course.

SECTION 8

Learning Agreement

Please tick boxes to confirm that you have read and understand each statement

If you have any questions about this agreement or any part of the enrolment form, please ask at reception for help.

- 1) I declare that the information I have given is, to the best of my knowledge, complete and correct.
- 2) I agree to follow the Idea Store Learning rules.
- 3) I confirm that I have received advice and guidance about my course.
This has included information on entry requirements, my choice of learning programme, an assessment of my suitability for the course, an assessment for Additional Learning Support and any further guidance (e.g. about child care and exams) as necessary (where appropriate).
- 4) I confirm that I have no outstanding debt to Idea Store Learning.

- 5) I agree that I am committed to pay any instalments agreed on any instalment plan I have signed regardless of whether or not I complete the course.
- 6) I understand that refunds will only be issued in exceptional circumstances in line with the Idea Store Learning refund policy (available on request).
- 7) I agree that if any sponsor named on this form fails to pay any part of my fees, I will become immediately liable for the outstanding balance.
- 8) I undertake to inform Idea Store Learning of any change to my benefit status that could affect my eligibility for fee remission.
- 9) I confirm that I will attend classes regularly, complete assignments within agreed time limits and take any examinations that are part of my learning programme.

Data Protection Statement and Fair Processing Notice

Data Protection Act 1998 – The information you provide will be passed to the Skills Funding Agency (the SFA). The SFA is responsible for funding, planning and encouraging education and training for young people and adults in England, and is registered under the Data Protection Act 1998. The information you provide will be shared with other organisations for the purpose of administration, careers and other guidance, and statistical and research purposes.

Other organisations with which we will share information include, the educational institutions and organisations performing research and statistical work on behalf of the SFA or its partners. The SFA also administers the Learning Records Service (LRS) which will use your information to create and maintain a unique learner number (ULN).

The SFA is also a co-financing organisation and uses European Social Funds from the European Union to directly or indirectly part-finance learning activities, helping develop employment by promoting employability, business spirit and equal opportunities, and investing in human resources. Further information about partner organisations and the ULN and what they do, may be found at www.sfa.gov.uk/providers/Data/help/ and by following the links to data

protection. At no time will your personal information be passed to organisations for marketing or sales purposes.

From time to time students are approached to take part in surveys by mail and phone, which are aimed at enabling the SFA and its partners to monitor performance, improve quality and plan future provision.

LBTH data protection registration states that the police are able to access learner's records on request. The Skills Funding Agency (the SFA) also administers the LRS Programme on behalf of the LRS membership. More information about LRS membership can be found at www.lrs.gov.uk.

The SFA is responsible for the development and operation of the Learning Records Service (LRS) and also the creation of a learner record. For learners of 13 years and over, identification information will be passed to the LRS to create and maintain a unique learner number (ULN).

In addition, participation and achievement information will be passed to the LRS to create and maintain a learner record. The LRS will enable, for the first time, a learner to have direct access to information held about them which learners are able to challenge, if appropriate. The LRS will enable organisations

allowed by Law and detailed at www.learningrecordsservice.org.uk to access the ULN and integrate it into their systems.

In addition, such organisations will have access to the participation and achievement information attributed to each ULN and thereby saving individuals having to supply the same information repeatedly to different organisations. Individuals are able to opt-out of sharing participation and achievement information in their learner record with those organisations detailed at www.learningrecordsservice.org.uk if they so wish.

“The information you supply will be used by the Chief Executive of Skills Funding, to issue you with a Unique Learner Number (ULN), and to create your Personal Learning Record. Further details of how your information is processed and shared can be found at www.learningrecordsservice.org.uk/privacynotice.”

LBTH will never pass your details onto private companies. However, we may from time to time send you information about reduced rate promotions, events, courses, or improvements to the services such as enrolments

Please tick the box if you **wish to opt-out of** to sharing your participation and achievement data.

Student Declaration Statement

I confirm that all details on this form are to the best of my knowledge true and accurate. I accept that Idea Store Learning has a **NO REFUND POLICY** except where Idea Store Learning closes a course. I understand that it is my responsibility to notify Idea Store Learning of my reasons for absence, and that if I miss 4 classes in a row I will be withdrawn from the course and not qualify for a refund.

Signature of learner:

Date:

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Original evidence of eligibility seen and checked (Less than 3 months old):

<input type="checkbox"/> Proof of benefit	19 <input type="checkbox"/> Family Learning	01 <input type="checkbox"/> 16-18	19 <input type="checkbox"/> ESOL	10 <input type="checkbox"/> 10% Early Bird
<input type="checkbox"/> Proof of address	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Company Invoice			
<input type="checkbox"/> Birth certificate	Total amount paid: £ <input type="text"/>		Receipt No: <input type="text"/>	
<input type="checkbox"/> ID card				
<input type="checkbox"/> Passport N° <input type="text"/>				

Enrolling Officer: **Store:** **Date:**