

STUDY PROGRAMMES/ APPRENTICESHIPS

If you have not chosen a course but would like an interview with the College Futures Team to discuss your ideas, please tick

If you know which course you would like to apply for please write the title and code here.

Title:

Code:

Why have you chosen this learning programme; what do you want to do next?

ADDITIONAL LEARNING SUPPORT

1) Do you have a learning difficulty or disability? Yes No

Yes No

Any literacy, numeracy or language (ESOL) needs will be assessed when you start a course at the College.

2) Do you have an Education Health and Care Plan (EHCP)? Yes No

Yes No

Please note, if an Additional Support assessment is booked for you then you must attend this BEFORE your course interview.

3) Are you/were you on a Special Needs Register at school? Yes No

Yes No

If you have answered yes to any of the points please complete the Additional Support section below.

If you tick Yes to number 2, please provide a copy of your assessment report with this form. We are unable to process any applications without this.

To help us to offer the best support for you please give us some extra information.

Please tell us why you need extra support in college. If it helps there is a list of possible reasons below so you can say which apply.

Main reason for support

Please tick the boxes below which apply

ADD/ADHD

Dyspraxia

Medical Condition

Asperger's

Epilepsy

Mental Health

Cerebral Palsy

Global Learning Delay

Mobility Difficulty

Down's Syndrome

Head Injury

Moderate Learning Difficulty

Dyscalculia

Hearing Impairment

Physical Disability

Dyslexia

LLN/Language Support (ESOL)

Visual Impairment

For office use only.

Date Received / /

Date Completed / /

ALS Date / /

LSI Date / /

HINT Date / /

If you ticked Dyslexia, do you have a formal diagnosis? Yes No

Yes No

If you have a hearing impairment do you need a signer to be present at your interview? Yes No

Yes No

Did you have help at your last school? Yes No

Yes No

What was the name of that school?

Name of Support Tutor: (If you have had one)

Please give the name(s) of any Support Workers/Key Workers who can give us more information:-

Name:

Tel:

Organisation:

When we have this information we will write to you and tell you how to get the support you need. We may invite you to come to college to see one of the Support Team to discuss how we can support you in college. Support staff are also available at all open events to discuss the support we can offer.

SIGNATURE

Signature of applicant

Date / /

I would like my daughter/son to be considered for the above mentioned course. If she/he is accepted, I undertake to allow her/him to remain until the last meeting of the course. (Applies to students under 19)

Signature of Parent/Guardian

Date / /

HOW WE USE YOUR PERSONAL INFORMATION

The personal information you provide is passed to the Education and Skills Funding Agency (ESFA), on behalf of the Secretary of State for the Department of Education (DfE) to meet its statutory responsibilities, including under the Apprenticeships, Skills, Children and Learning Act 2009 and to create and maintain a unique learner number (ULN) and a personal learning record (PLR). Your information will be securely destroyed after it is no longer required for these purposes. Your information may be shared with third parties for education, training, employment and well-being related purposes, including for research. This will only take place where the law allows it and the sharing is in compliance with the Data Protection Act 1998 data protection legislation. Further information about use of and access to your personal data, and details of organisations with whom we regularly share data, are available at: www.gov.uk/government/publications/esfa-privacy-notice

We may also use your information to keep in touch with you to promote courses and events that might be of interest to you. We'll always treat personal details with the utmost care and they will not be passed to any other organisations. Please let us know how you would like us to contact you by selecting from the options below.

Are you happy to be contacted about courses and events? Yes No

Are you happy to be contacted for surveys and research? Yes No

Please let us know how you would like us to contact you about these items by selecting from the options below.

Email Yes No

Post Yes No

SMS or phone Yes No