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| PLR checked   Checked By:  **Office use only** | | **Enrolment Form 2020 / 2021** | | | | | | | | | **NCLogoBlk(50)** | | |
| Sign (MIS) | | | | Student ID | | Date | | |
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| 1. **Your personal details** (**please use BLOCK CAPITALS throughout)** | | | | | | | | | | | | | |
| Title: |  | | | | | | Name of previous School/College attended: | | | |  | | |
| Surname: |  | | | | | | Did you receive Free Meals at school (under 19 only)? | | | | | Yes  No  | |
| Forename(s) |  | | | | | | Any previous Surname: | |  | |  | | |
| Address 1: |  | | | | | | Gender : Male  | | | Female  | Other  | | |
| Address 2 : |  | | | | | | Age on 9th September 2020: | | |  |  | | |
| Postcode: |  | | | | | | Date of Birth: | / / | | |  | | | |
| Time at address |  | | |  | | | 1. **Emergency contact details (must be 18+)** | | | | | | |
| Home Phone: |  | |  | |  | | For learners under 19 or funded by an employer these details will be used by | | | | | | |
| Work Phone: |  | |  | |  | | the college to support and update them on your progress/attendance | | | | | | |
| Mobile No. |  | |  | |  | | Contact name: | | |  | | |  |
| Email: |  | |  | |  | | Relationship: | | |  | | |  |
| NI Number: |  | |  | |  | | Phone Number/s: | | |  | | |  |
| Unique Learner Reference No: | | | | | | | Email address: | | |  | | |  |
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| 1. **Previous qualification level achieved** (please tick the highest level qualification achieved prior to 31st August 2020)  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | 9 |  | Entry Level | 11 |  | HND, Foundation Degree, Teaching qualification including PGCE, Nursing (SRN), NVQ Level 5 | | 7 |  | Other below Level 1 | 12 |  | Degree, Level 6 | | 1 |  | GCSE Grades D-G, BTEC First Award/ Certificate/ Diploma at Level 1, Foundation Diploma | 13 |  | Post Graduate Certificates and Diplomas, Masters, Doctorates, Level 7 and above | | 2 |  | 5 or more GCSEs grades A-C or 9-4 , 1 A Level, 2/3 AS Levels, Higher 14-19 Diploma or equivalent | 97 |  | Other qualification, level not known | | 3 |  | 2 or more A Level passes, 4 or more AS Levels, Advanced Diploma, National Diploma, Extended Diploma, NVQ Level 3 | 98 |  | Not known | | 10 |  | HNC/ NVQ Level 4 | 99 |  | No Formal qualifications | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | 1. **Previous qualification results** (*This section is compulsory for learners under 19 and Apprentices)* | | | | | | | | | | | | | | *Qualification* | *Level* | *Grade* | | *Date Achieved* | | *Qualification* | | | *Level* | *Grade* | | *Date Achieved* | | *1.* |  |  | |  | | *5.* | | |  |  | |  | | *2.* |  |  | |  | | *6.* | | |  |  | |  | | *3.* |  |  | |  | | *7.* | | |  |  | |  | | *4.* |  |  | |  | | *8.* | | |  |  | |  | | ***Maths and English Grades - to be completed by a member of the Essential Skills/Apprenticeship Team*** | | | | | | | | | | | | | | *GCSE in English Language Grade:* | | |  | | *Date achieved:* | |  | *Evidence seen and scanned to file * | | | | | | *GCSE in English Literature Grade:* | | |  | | *Date achieved:* | |  | *Staff Signature:* | | |  | | | *GCSE in Mathematics Grade:* | | |  | | *Date achieved:* | |  | *Date:* | | |  | | | | | | | | | | | | | | | |

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| 1. **Your choice of course(s)** | | | | | | |
| Course code | Title | Learning aim | Start date | End date | Tuition Fee | Registration/ Exam /Materials Fees |
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| **Total Payable** | | | | | £ | |

**This form can be made available in larger print or other formats on request. If you require an alternative format or need help in completing this form, please contact the Information Services Team on 01635 845000**

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| **Equal opportunities information -** Newbury College is committed to providing equal opportunities for all learners.  Please complete the sections below on ‘Support for You’ and ‘Ethnic Monitoring’ to help us meet this commitment. | | | | | | | | |
| 1. **Support For You** | | | | | | | | |
| * Do you consider yourself to have a learning difficulty and/or disability and/or health issue?   Yes No Prefer not to say  | | | | | | | | |
| * Do you have an Education Health Care plan? Yes No  | | | | | | | | |
| Please tick the nature of any disability/learning difficulty by ticking the relevant boxes below. Tick all that are relevant. | | | | | | | | |
| *Please add a “P” next to the disability you would say is your primary disability/learning difficulty* | | | | | | | | |
|  |  | 4 - Visual impairment |  |  | 16 - Temporary disability after illness or accident or accident | | | |
|  |  | 5 - Hearing impairment |  |  | 17 – Speech, Language and Communication Needs | | | |
|  |  | 6 - Disability affecting mobility |  |  | 93 - Other physical disability | | | |
|  |  | 7 - Profound complex disabilities |  |  | Please enter details: |  | | |
|  |  | 8 - Social and emotional difficulties |  |  | 94 - Other specific learning difficulty (e.g. Dyspraxia) | | | |
|  |  | 9 - Mental health difficulty |  |  | Please enter details: |  | | |
|  |  | 10 - Moderate learning difficulty |  |  | 95 - Other medical condition (for example epilepsy, asthma, diabetes) | | | |
|  |  | 11 - Severe learning difficulty |  |  | Please enter details: |  | | |
|  |  | 12 - Dyslexia |  |  | 96 - Other learning difficulty | | | |
|  |  | 13 - Dyscalculia |  |  | 97 - Other disability | | | |
|  |  | 14 - Autism spectrum disorder |  |  | 98 - Prefer not to say | | | |
|  |  | 15 - Asperger’s syndrome |  |  | 99 - Not provided | | | |
| Would you like a member of the Support Team to contact you? | | | | | | Yes No  | | |
| Have you had help with examinations in the past? | | | | | | Yes  No  | | |
| Do you need extra support in Maths and/or English? Maths | | | | | | Yes  | English: | Yes  |

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| 1. **Ethnic monitoring** (please tick your ethnic background) | | | | | | | | |
| **White** | |  | **Asian / Asian British** | | |  |  |  |
|  | 31 - English / Welsh / Scottish / Northern Irish / British |  |  | 39 - Indian |  | |  |
|  | 32 - Irish |  |  | 40 - Pakistani |  | |  |  |
|  | 33 - Gypsy or Irish Traveller |  |  | 41 - Bangladeshi |  | |  |  |
|  | 34 - Any other White background |  |  | 42 - Chinese | | |  |  |
| **Mixed / Multiple ethnic group** | |  |  | 43 - Any other Asian background | | | |  |
|  | 35 - White and Black Caribbean |  | **Black / African / Caribbean / Black British** | | | | | |
|  | 36 - White and Black African |  |  | 44 - African | | |  |  |
|  | 37 - White and Asian |  |  | 45 - Caribbean | | |  |  |
|  | 38 - Any Other Mixed / multiple ethnic background |  |  | 46 - Any other Black / African / Caribbean background | | | | |
| **Other ethnic group** | |  |  | | | |  |  |
|  | 47 - Arab |  |  | 99 – Not provided | | |  |  |
|  | 98 - Any other ethnic group |  |  |  | | |  |  |

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| 1. **Proof of eligibility for Government funding** | | | | | | | | | | | | |
| The Education and Skills Funding Agency (ESFA) does not generally fund learners who are not UK or EEA (European Economic Area) nationals living in England for three years prior to the first day of learning, unless they meet the requirements specified in the Education (Fees and Awards) Regulations 1997. | | | | | | | | | | | | |
| What is your nationality according to your passport?: | | | |  | | | If you are not a British National or are here with a visa you must bring your passport, visa and/or evidence with you | | | | | |
| If you are a British citizen and have been continuously resident in the UK for at least the previous 3 years, please tick this box **** | | | | | | | | | | | | |
| Or if you are a citizen of another member state of the EEA and have been continuously resident in the UK or EEA for at least the previous 3 years on the first day of learning please tick this box ****Please state EEA member state: | | | | | | | | | | | | |
| **If you have not ticked either of the above boxes, please answer the following questions and provide the necessary evidence:** | | | | | | | | | | |  | |
| Does your passport state that you have ‘indefinite leave to remain’, ‘settled status’ or the ‘right to abode in the UK’? Yes No  | | | | | | | | | | | | |
| Do you have official status as an Asylum Seeker? Yes No  | | | | | | | | | | | | |
| Do you have official status as a Refugee? Yes No  | | | | | | | | | | | | |
| Passport Number and country: | |  | Visa Type: | |  | Visa Number: | | |  | Visa Expiry: | | / / |
| 1. **Discount Eligibility**  (please tick as appropriate) | | | | | | | | | | | | | |
| **Note: Proof of eligibility is required for all discounts, excluding under 19, and copies of all paperwork will be taken.** | | | | | | | | | | | | | |
| No discount will be given without supporting evidence and the relevant “Self-Declaration” or “Entitlement’ form’ completed and signed. All relevant fees will apply unless supporting evidence is supplied. Relevant Form Attached and Evidence received  | | | | | | | | | | | | | |
|  | Under 19 years at the start of the course | | | | |  | | ESA Employment Support (WRAG - income based only) | | | | | |
|  | Job Seeker’s Allowance (JSA) | | | | |  | | Universal Credit | | | | | |
|  | Council Tax/Housing Benefit or Income Support for Unemployed Learners | | | | |  | | Gross earnings under £17,004. Requires low wage form. | | | | | |
|  | Aged 19-23 on the day the course starts and studying for a first full Level 2 qualification | | | | |  | | Aged 19-23 on the day the course starts and studying for a first full Level 3 qualification | | | | | |
|  | West Berkshire course eligible for concession discount (identified in the course guide with  ).  Please tick appropriate discount rate  Aged 60+ resident in West Berkshire (30%)  West Berkshire resident receiving certain benefits (proof required) 50%  | | | | | | | | | | | | |
| **Refunds:** All fees must be paid on enrolment. Fees will only be refunded if the College closes a course. | | | | | | | | | | | | | |

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| 1. **Household details** (please tick which of the following statements apply (one or 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 | | | | | |  |
| OR | | | | | | |
| I confirm that I wish to withhold this information | | | | | |  |
| Learner signature: |  |  | Date: |  |  | |

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| 1. **Employment Status** (either on the day you filled in this form, or on the day before your course starts) | | | | | | | | | | | | | | | | | |
| **People who are** **not in paid employment** | | | | | | | | | | | | | | | | | |
| Are you currently looking for work? (Tick one and then answer the next question.) | | | | | | | | | | | | | | | | | |
|  | I am not looking for work and/or not available to start work (most **16-18 year-old full-time students** and people who are **retired**.) | | | | | | | | | | | | | | | | |
|  | I am looking for work and available to start work | | | | | | | | | | | | | | | | |
| How long have you been unemployed or retired? (Tick one.) | | | | | | | | | | | | | | | | | |
|  | under 6 months | |  | | 6-11 months | | |  | 12-23 months | | | |  | 24-35 months |  | 36 or more months | |
| **People who are** **in paid employment or self-employment**. | | | | | | | | | | | | | | | | | |
| Are you employed or self-employed? | | | | | | | | | | | | | | | | | |
|  | I am employed by somebody else. If the course is an Apprenticeship or your employer is paying the fee, you must fill in **Part 12** below “Your Employer”. | | | | | | | | | | | | | | | | |
|  | I am registered self-employed with HM Revenue and Customs | | | | | | | | | | | | | | | | |
| How many hours a week do you usually work? | | | | | | | | | | | | | | | | | |
|  | 0-10 hours |  | | 11-20 hours | |  | 21 to 30 hours | | | |  | 31+ hours | | |  | |  |
| How long have you been working? | | | | | | | | | | | | | | | | | |
|  | up to 3 months |  | | 4-6 months | |  | 7-12 months | | |  | over 12 months | | | | | | |

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| 1. **Your Employer** *(You will need to provide written confirmation at enrolment if your Employer/Training Provider is paying your fees.)* | | | | | | | | |
| Employer name: | |  | | Training Provider name: | |  | |  |
| Employer address: | |  | | Contact name: | |  | |  |
|  |  |  | | Please invoice my Training Provider for my course fees Yes | | | |  |
|  |  |  | | Is the course you have chosen relevant to your employment? Yes | | | |  |
|  |  |  | | Is your employer releasing you to attend College? Yes | | | |  |
| Please invoice my Employer / Agent for my course fees | | |  | Amount to invoice £ |  | |  |  |

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| 1. **Criminal convictions** | | | | | | | | | | | |
| We must ask you to provide details of any **unspent** criminal convictions. You do not need to tell us about any spent convictions unless your course involves access to children and young adults under the age of 18 or vulnerable adults up to the age of 25. If you are enrolled to such a course, any failure to disclose such convictions may result in the College asking you to withdraw. Any information you give will be completely confidential and will be considered only in relation to this enrolment. An unspent criminal conviction does not necessarily prevent you from enrolling. | | | | | | | | | | | |
| Do you have any unspent criminal convictions? | | No | |  | Yes | |  (give details) | | | | |
| 1. **Data Protection and sharing, Privacy notice** | | | | | | | | | | | | |
| All data is stored and processed in accordance with the Data Protection Act / General Data Protection Regulation. The information you provide on this form will be passed to the Education and Skills Funding Agency and, when needed, the Department for Education, to meet legal/funding responsibilities under the Apprenticeship, Skills, Children and Learning Act 2009, and for the Learning Records Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for purposes related to education research or training. Other organisations include the Department for Business, Energy and Industrial Strategy, Adviza, Job Centre Plus, Local Authorities, Office for Students (OfS), Higher Education Access Tracker (HEAT), Awarding Bodies, Local Enterprise Partnership, educational institutions and organisations performing research and statistical work on behalf of the Agency or partners of those organisations. Further information about use of and access to your personal data and details of partner organisations are available at, <https://www.newbury-college.ac.uk/178-information/website/533-privacy-policy.html>, <https://www.gov.uk/government/publications/esfa-privacy-notice>, [www.gov.uk/government/publications/lrs-privacy-notices](https://www.gov.uk/government/publications/lrs-privacy-notices) and <https://www.officeforstudents.org.uk/privacy/>.  ***Destination Capture –*** if you leave /complete your course the provider will conduct a follow up exercise to capture your destination and progression. This is used by the DfE to monitor future success of learners and is compulsory for a provider’s ability to perform their public task.  ***Higher Education Students only:*** The OfS surveys all HE students 15 months after graduation of their course (Graduate Outcomes survey), to monitor and improve the quality of provision. This is a compulsory survey and you will be contacted by the Office for Students directly.  **Surveys and Research**  At no time will your personal information be passed to external organisations for marketing or sales purposes. Newbury College. the Agency and their partners may wish to contact you from time to time in respect of surveys and research to monitor performance, improve quality and plan future provision and to inform you about courses, or learning opportunities relevant to you | | | | | | | | | | | | |
| Please tick if you agree to be contacted by Newbury college and/or the Government Funding Agency and their partner organisations: | | | | | | | | | | | | |
| About courses and learning opportunities by: |  | | E-mail | | |  | | Post |  | Telephone |  | |
| For surveys and research by: |  | | E-mail | | |  | | Post |  | Telephone |  | |

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| 1. **Learning Agreement** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | | I am personally liable for all the costs associated with the course. I agree to pay all costs if my employer / sponsor / Student Loan Company refuses to pay my fees. | | | | | | | | | | | | | | 9 | | | | I accept that the College has the right to share information about my progress with my parent(s) / guardian if I am under 19, and with my employer / sponsor if they are paying my fees. | | | | | | | | | | | |
| 2 | | I am entitled to any practical or educational help I need to enable me to complete the course and know how to access it. | | | | | | | | | | | | | | 10 | | | | I agree to Newbury College processing personal data, including ‘sensitive’ personal data (ethnicity, disability etc) contained on this form or other data that the College may obtain from me or other people, whilst I am a student. I agree to the processing of such data for any purposes connected with my studies or my health and safety whilst on the premises or for any other legitimate reason. | | | | | | | | | | | |
| 3 | | I have been advised of all the costs and any additional study associated with the course. | | | | | | | | | | | | | |  | | | |
| 4 | | This activity may be part financed by match funding through the European Social Fund (ESF). ESF supports activities to extend employment opportunities and develop a skilled workforce. | | | | | | | | | | | | | |  | | | |
| 5 | | I must inform Newbury College if my benefit entitlement changes while I am at College. | | | | | | | | | | | | | | 11  12 | | | | I agree to the College publishing data on my achievements.  I confirm I have been given appropriate advice and guidance | | | | | | | | | | | |
| 6 | | I understand that the College may need to contact me regarding my current studies. The College may contact me using various methods such as text messages, email, mobile phone, home telephone number. | | | | | | | | | | | | | | 13 | | | | To the best of my knowledge, everything I have declared on this form is both true and complete. | | | | | | | | | | | |
| 7 | | I confirm I have read and understood the Privacy Policy of Newbury College and applicable Government Funding Agencies | | | | | | | | | | | | | | 14 | | | | I must abide by all College rules and regulations. | | | | | | | | | | | |
| 8 | | I agree the content contained in this form including special categories such as Health, disabilities and ethnic origin can be processed. I agree for my photo to be attached to my file. | | | | | | | | | | | | | | 15  16 | | | | The level of the course I have chosen is appropriate to my previous qualifications and/or prior experience.  I must abide by the Student Code of conduct and understand there will consequences when this is breached | | | | | | | | | | | |
| **Learner Signature** | | | | | |  | | | | | | **Date** | | |  | | | | **College Staff:** | | | | |  | | | | | | **Date:** |  |
| 1. **Payment** (If you are paying your own fees, please complete this section. If your employer or training provider is paying, please complete section 12 and supply written evidence) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| You can pay by cheque, credit card, debit card, bank transfer or cash (if paying in person at the College). Please indicate payment method. If paying by instalments, please attach mandate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Cash |  | Cheque | | | |  | | Credit/ Debit Card | | |  | Bank Transfer | | | | | |  | | Instalments | | |  | | Advanced Learner Loan/HE Loan | | | |
| Amount Paid : | | | | £ | | | | | | |  | | |  | Payee: | | | | | | | |  | | | | | | | | |
| **FOR OFFICE USE ONLY** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Amount Paid:** | | | | **£** | | | | | | **Received by staff name:** | | | |  | | | **Date:** | | | | |  | | | | | **Receipt:** | |  | | |
| **Learner Verification – please tick one the following:** | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
|  | Re-enrolling | | | | | |  | Driving Licence | | | | |  | Passport | | | |  | | | | NI Card | | |  | Examination Results Slip / Certificate | | | | | |
|  | Benefits Documents | | | | | |  | ID Card / other National ID | | | | | | | | | |  | | | |  | | |  | Other (please specify) | | | | | |

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