



Nottinghamshire
County Council

Adult & Community Learning Service Enrolment & Learning Agreement form **ACLS 05** (10/11)

ACLS 05

Welcome to your course

Thank you for choosing to enrol on an Adult and Community Learning Service (ACLS) course. Learners are asked to complete an enrolment form in order to provide us with information about who is attending our courses. This helps to make sure we are attracting a wide range of learners from our target communities.

If you need any help to complete the form then please ask your tutor for assistance.

How to fill in the form

About you:

Please complete all the personal information in the spaces provided on the form.

Box A - Ethnic Groups

For details of ethnic group numbers to put in **Box A** please see **list below**.

- 11 Asian or Asian British - Bangladeshi
- 12 Asian or Asian British - Indian
- 13 Asian or Asian British - Pakistani
- 14 Asian or Asian British - any other Asian background
- 15 Black or Black British - African
- 16 Black or Black British - Caribbean
- 17 Black or Black British - any other background
- 18 Chinese
- 19 Mixed - White and Asian
- 20 Mixed - White and Black African
- 21 Mixed - White and Black Caribbean
- 22 Mixed - any other mixed background
- 23 White - British
- 24 White - Irish
- 25 White - any other background
- 98 Other
- 99 Not known/Not provided

Box B - Disability

We also need to know if you have a disability or learning difficulty so we can provide additional support should you require it.

If you do have a disability please tick the relevant "yes" box and then use **the list below** to complete **Box B** on the form.

- 01 Visual impairment
- 02 Hearing impairment
- 03 Disability affecting mobility
- 04 Other physical disability
- 05 Other medical condition (for example epilepsy, asthma, diabetes)
- 06 Emotional behavioural difficulties
- 07 Mental health difficulty
- 08 Temporary disability after illness (for example post-viral) or accident
- 09 Profound complex disabilities
- 10 Aspergers syndrome
- 90 Multiple disabilities
- 97 Other
- 99 Not known/information not provided

Box C - Learning Difficulty

If you have a learning difficulty please tick the relevant "yes" box and then use **the list below** to complete **Box C** on the form.

- 01 Moderate learning difficulty
- 02 Severe learning difficulty
- 10 Dyslexia
- 11 Dyscalculia
- 19 Other specific learning difficulty
- 20 Autism spectrum disorder
- 90 Multiple learning difficulties
- 97 Other
- 99 Not known/information not provided

Please remove this top sheet from the form

Copies of this form can be made available on request in other formats e.g. tape, large print and Braille

Personal Circumstances:

We need to know about benefits that people receive so we know whether or not you have to pay fees on courses where fees are charged. You will need to provide proof that you receive the benefit in order not to have to pay fees.

Box D - Benefits

Using **the list below** please tick the relevant numbers in **Box D** to indicate which benefits you are receipt of.

- | | |
|--|--|
| 01 Jobseeker's Allowance (income based) | 05 Working Tax Credit |
| 02 Housing or Council Tax Benefit (not single person's discount) | 06 Incapacity Benefit |
| 03 Income Support | 07 Pension Credit (not savings credit) |
| 04 Employment and Support Allowance | 08 An unwaged dependant of those listed above |

Level of Learning:

We gather information on the level of qualifications learners on our courses already have when they start their course. Please use **list below** to complete **Box E** on the form.

Box E - Level of Learning

| Level | Academic and Vocational qualification equivalent |
|---------|--|
| Level 0 | No Qualifications |
| Level P | Word Power / Number Power / Pre-Entry or Entry Level Qualifications / Non - Accredited Qualifications |
| Level 1 | GCSE / O Level Grades D - G (or fewer than 5 at grades A-C), CSE below grade 1, 1 AS level <i>BEC General certificate / Diploma, BTEC first certificate, City & Guilds Operative Awards, CPVE Year 1 (Technician), GNVQ Foundation, LCCI Elementary / First Level, NVQ Level 1, PEI Elementary / First Level, RSA Elementary / first level, RSA Vocational certificate</i> |
| Level 2 | GCSE / O Level (5 or more at grades A-C), CSE Grade 1 (5 or more), 1 Advanced level, 2 / 3 AS levels <i>BEC General Certificate with credit / diploma with credit, BTEC First diploma, City Guilds Higher Operative / Craft, GNVQ Intermediate, LCCI Certificate (Second level), NVQ level 2, PEI stage 2, Pitmans Intermediate level 2, Diploma certificate, RSA Diploma</i> |
| Level 3 | 2 or more A level passes, 4 or more AS levels <i>BEC National ONC / OND, BTEC National ONC/ OND, City & Guilds advanced craft, GNVQ advanced, LCCI diploma (third level), NVQ level 3, Pitmans Level 3 advanced higher certificate, RSA Stage 3 advanced Diploma, TEC Certificate / Diploma, Access to Higher Education Courses, ESOL & Foreign languages advanced awards</i> |
| Level 4 | First degree, Teaching qualifications (including PGCE) <i>BEC National HNC / HND, BTEC National HNC / HND, Higher Education certificate, Higher education diploma, LCCI advanced level, NVQ level 4, Nursing (SRN), RSA advanced certificate, RSA higher diploma</i> |
| Level 5 | Higher degree <i>Continuing education diploma, NVQ level 5, Other high level professional qualifications</i> |

Signature:

Once you have completed the form and you are clear about whether or not you will be required to pay fees please read the Learning Agreement and Privacy Statement on the reverse, then tick the relevant boxes and sign the form.

About You:

Title: Mr Mrs Miss Ms (please circle) Unique Learner No.

Surname First Name

Home Address

Home Postcode Email

Contact Tel Gender (M or F) Date of Birth

Have you been a permanent resident of the UK or an EU/EEA Country for the last 3 years? Yes No

Nationality

Ethnic Group Number: (please refer to the list on the covering sheet and enter the relevant number in Box A) **Box A**

The tutor will use the following information to plan with you any support you may need to fully participate on this course.

• Do you consider yourself to have a disability? Yes No Enter the most relevant code from covering sheet here **Box B**

• Do you consider yourself to have a learning difficulty? Yes No Enter the most relevant code from covering sheet here **Box C**

• Do you consider yourself to have a health problem which may affect you on this course? Yes No

Personal Circumstances:

Fees: I WILL be paying fees for this course I will NOT be paying fees for this course.

I am in receipt of the following benefits. (please refer to the list on the covering sheet and tick all categories that apply to you)

Box D 01 02 03 04 05 06 07 08

Have you taken part in any education or training in the last 3 years? Yes No

Are you in paid employment? Yes - Full time Yes - Part time No

Level of Learning:

Please refer to list on the covering sheet and enter the relevant number here **Box E**

for the level of qualifications you have now.

Signature:

Learning Agreement: I have read the Learning Agreement overleaf and am happy with the content.

Privacy Statement: I have read the privacy statement overleaf.

Tick this box if you do not wish to be contacted in respect of surveys and research by mail or phone.

Tick this box if you do not wish to be contacted about courses or learning opportunities by post.

Signature (Learner) Date Signature (Provider) Date

Provider **Course Ref**

| Title | Start Date | Day | Time | Venue |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Payment Total Tuition Fee £ Receipt No

Pay as you learn £ Examination Fees £

Fee remission evidence letter. Issuing office Date of letter

Evidence of learner's identity seen by provider (please tick relevant box)

- 00 - None provided 01 - Relationship with school 02 - Passport 03 - Driving Licence
 04 - ID Card 05 - National Insurance Card 06 - Certificate of Entitlement to funding
 07 - Bank / Credit / Debit Card 999 - Other (please specify)

Fee/Identity Evidence seen by Date

Learning Agreement

I fully understand the implications of my choice of learning programme and the entry requirements for that programme. I have had all aspects of student support explained to me and I am satisfied that this learning programme is suitable to my needs. I also understand that I can negotiate this learning agreement at any time in consultation with a nominated tutor. I undertake to notify the provider of any change of my circumstances which may affect my programme. I agree that my admission as a student is subject to the provider regulations.

Privacy Statement 2010/2011

How We Use Your Personal Information

The personal information you provide is passed to the Chief Executive of Skills Funding and, where required, the Young People's Learning Agency for England ("the YPLA") to enable those organisations to fulfil their statutory obligations, principally under the Apprenticeships, Skills, Children and Learning Act 2009. Both organisations are registered as data controllers with the UK Information Commissioner's Office.

The Skills Funding Agency funds adult further education and skills training, including apprenticeships, in England. The YPLA is responsible for arranging the provision of funding for the education and training of young people in England. The Skills Funding Agency processes learner data on behalf of the YPLA.

The information you provide may be shared with other organisations for purposes of administration, the provision of career and other guidance and statistical and research purposes, relating to education or training. Other organisations include the Department for Children, Schools and Families, the Department for Business, Innovation and Skills, Local Authorities, Connexions, Higher Education Statistics Agency, Higher Education Funding Council for England, educational institutions and organisations performing research and statistical work on behalf of the Skills Funding Agency, the YPLA, or partners of those organisations.

The Skills Funding Agency also administers the learner registration service (LRS) which uses your learner information to create and maintain a unique learner number (ULN).

Further information about use of and access to your information is available at: Skills Funding Agency:

<http://skillsfundingagency.bis.gov.uk/foi.htm>

YPLA: <http://www.ypla.gov.uk/foi.htm>

At no time will your personal information be passed to organisations for marketing or sales purposes. The YPLA, the Chief Executive of Skills Funding 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.

LLSC No 020 Provider No (UPIN) 107952 UK Provider Reference No (UKPRN) 10004801



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internet **www.nottsaclsmoodle.net**
published **June 2010**

D&P/6.10/COMS/4283aw5

**Skills
Funding
Agency**

About You:

Title: Mr Mrs Miss Ms (please circle) Unique Learner No.

Surname First Name

Home Address

Home Postcode Email

Contact Tel Gender (M or F) Date of Birth

Have you been a permanent resident of the UK or an EU/EEA Country for the last 3 years? Yes No

Nationality

Ethnic Group Number: (please refer to the list on the covering sheet and enter the relevant number in Box A) **Box A**

The tutor will use the following information to plan with you any support you may need to fully participate on this course.

• Do you consider yourself to have a disability? Yes No Enter the most relevant code from covering sheet here **Box B**

• Do you consider yourself to have a learning difficulty? Yes No Enter the most relevant code from covering sheet here **Box C**

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Level of Learning: Please refer to list on the covering sheet and enter the relevant number here **Box E**

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