

ESF Community Grants

Learner reference

Enrolment Form 2019/21 Greater Manchester

1920/

Please complete this form in **BLACK BALL POINT PEN** and **CAPITAL LETTERS**, ticking boxes as appropriate. If you would like this form in a larger format, please ask your tutor.





Proje	ct d	etc	ils																													
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Title:	Mr		М	rs		M	liss		Ms	3			Ot	her	(fo	r ex	xar	npl	e, C	Pr)			_			L	I					
First Name:										Ι	Ι				Ι	I					Ι	Ι	I			I	Ι	I		I		
Middle Name:				I						I										L			I					I				
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Household Situation												
No member of the household in value (including myself) is employed	which I live I am a lone	I am a lone parent										
The household that I live in include (aged 18 or over)	des only one adult None of the	ese statements apply										
There are one or more dependen 0-17 years or 18-24 years if full til inactive) in the household												
Ethnicity												
White	Other Ethnic Group	lack/Black British										
31 White British	47 Arab	44 African										
32 Irish	98 Any other ethnic group	45 Caribbean										
33 Romany/Irish Traveller		46 Other Black Background										
34 Other White Background	Asian/Asian British											
	39 Indian											
Mixed/Multiple Ethnic Group	40 Pakistani											
35 White and Black Caribbean	41 Bangladeshi											
36 White and Black African	42 Chinese											
37 White and Asian	43 Any other Asian background											
38 Other Mixed/Multiple Ethnic Background												
Learning difficulty, disability or	health issue/support requiremer	nts										
Do you have a learning difficulty, disabilit	y or health issue? Yes No											
If you have answered yes, please comple	ete the section below ticking the category of	or categories that apply.										
15 Asperger's syndrome	07 Profound complex	95 Other medical condition										
14 Autism spectrum disorder	disabilities	(for example epilepsy, asthma, diabetes)										
06 Disability affecting mobility	11 Severe learning difficulty	93 Other physical disability										
=	08 Social and emotional											
13 Dyscalculia	difficulties	94 Other specific learning difficulty (e.g. Dyspraxia)										
12 Dyslexia	12 Dyslexia 16 Temporary disability after illness (for example post-viral) 17 Speech, langua											
05 Hearing impairment	or accident	communication needs										
09 Mental health difficulty	04 Visual impairment	97 Other disability										
10 Moderate learning difficulty	96 Other learning difficulty	98 Prefer not to say										
If you have ticked more than one categor the category which will impact most on												

Previous Quali	fication:									
Please indicate the	highest qualification you gained before atten	ding this	s co	ourse (refer to the Tut	or if you ne	ed support):				
99 No previou	us qualifications	1		Certificates of Higher	HNC/NVQ					
09 Entry Leve	09 Entry Level			(Level 4)						
	evel at grades D-G/Functional Skills									
	(Level 1)	П,		 Bachelor's Degree – graduate certificates and diplomas (Level 6) 						
	GCSE/O Level at grades A-C/ Skills (Level 2)	1	3 1	Masters Degree, Doctorates, postgraduate certificates and diplomas (Level 7 and above)						
03 2 or more	2 or more A Level or 4 AS Levels/BTEC/NVQ		C							
(Level 3)		9	7 (Other qualification, le	vel not kno	wn				
Employment o	ınd Benefit Status									
	oyed, looking for work and to start work.									
			P	Please indicate lengt	th of time r	not in work:				
	oyed, not looking for work t available to start work		0	Less than 6 months	04	24-35 months 36 months or				
50 Retired			0	02 6-11 months	Ш **	more				
			0	12-23 months						
Do you claim	any of the following benefits?									
01 Job Seeke	rs Allowance									
02 Employme (ESA) – w	ent and Support Allowance vork									
44 Universal	Credit									
	upport or Employment and Support SA) - support group									
23 Pension G	uarantee Credit									

Privacy Notices - How we use your Personal Information

WEA: All the personal details you have provided to the WEA will be retained and protected by the WEA in accordance with the General Data Protection Regulations. If you have any complaints about the way the WEA collects and stores your data, you have the right to lodge a complaint with the UK's Information Commissioners Office **ico.org.uk**.

Education and Skills Funding Agency (ESFA): This privacy notice is issued by the Education and Skills Funding Agency (ESFA), on behalf of the Secretary of State for the Department of Education (DfE). It is to inform learners how their personal information will be used by the DfE, the ESFA (an executive agency of the DfE) and any successor bodies to these organisations. For the purposes of the relevant data protection legislation, the DfE is the data controller for personal data processed by the ESFA. Your personal information is used by the DfE to exercise its functions and 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 Data Protection legislation. The English European Social Fund (ESF) Managing Authority (or agents acting on its behalf) may contact you in order for them to carry out research and evaluation to inform the effectiveness of training.

Further information about the use of and access to your personal data, details of organisations with whom we regularly share data, information about how long we can retain your data, and how to change your consent to being contacted, please visit: gov.uk/government/publications/esfa-privacy-notice

contacted after you have completed your programme of learning to establish whether you have entered employment or gone on to further training. You can opt out of contact for other purposes by ticking any of the following boxes.
Please tick if you do not wish to be contacted about: Courses or learning opportunities Surveys and research
Please tick if you do not wish to be contacted by: Post Phone E-mail
Declarations
I certify that the information contained on this form is correct and accurate. I understand this activity is funded by the European Union through the European Social Fund (ESF). I have read and agreed to the Privacy Notices section – How We Use Your Personal Information.
Signed: Participant Date: D D M M Y Y Y Y
Declaration on behalf of the ESF Community Grant Recipient Organisation I certify that the information contained on this form is correct. I have seen documentary evidence verifying: the identity of this participant, their address, their status as indicated above and their right to work in the U.K.
Signed: Date: D D
Print Name:

Contact by the Education and Skills Funding Agency (ESFA) or its partners



Workers' Educational Association

W: www.wea.org.uk

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