# GLA AEB/ESF 2019/20 ENROLMENT FORM/LEARNING AGREEMENT

SECTION 1 – Id	entifier Codes	(OFF	ICE US	E ON	LY)															
Unique Learner	Number																			
Full/co-Funding Indicator Full fund				ding				Co-	fundi	ng										
Funding Allocat	ion	AE	В			•							•							
Training Provid	er Name																			
SECTION 2 – Le	arner Informat	tion (	Learne	er to	comi	olete	in BL	оск (	CAPIT	ALS ι	sing	Black	Ink) -	- Man	dator	V				
Family Name:					•				1	Natio nsura	nal					•				
Forenames:	enames:				C	Gender				ale $\square$				Othe answ	_	]				
Date of Birth:	DD/MM/YI	EAR								<b>Age</b> on 31 /	Augusi	t 2019)								
	House No./N & Street:	lame																		
	Suburb/Villa	ge:																		
Address:	Town/City a	nd co	unty:																	
Post Code:								Postcode prior to enrolment if different from current postcode												
	Home Tel No	):																		
Contact Dataile	Work Tel No	:																		
Contact Details	Mobile Tel N	o:																		
	Email Addres	ss																		
	Name:																			
Emergency Contact Details:	Relationship	:																		





SUPPORTED BY
MAYOR OF LONDON



SECTION 3 - Ethnicity (PI	ease tick	what bes	st describes you)						
Asian				Mix	ed				
☐ (39) Indian				(35) Mixed - White and Black Caribbean					
☐ (40) Pakistani				☐ (36) Mixed White Black African					
☐ (41) Bangladeshi				☐ (37) Mixed – White Asian					
(42) Chinese					38) Mi	xed - aı	ny other Mix	ked multiple background	
☐ (43) any other Asian Ba		\A/ -:							
Black/African/Caribbean/Black British				White  ☐ (31) English/Welsh/Scots/Northern Irish/British					
(44) African					32) Iris	_		,	
(45) Caribbean					-		rish Travelle	or .	
(46) Any other Black ba	ackground	4					White back		
☐ (47) Arab		-		— <b>·</b>	.,	,		9. 0 32	
(,,					98) Otl	her			
SECTION 4 - Nationality/	Residency	у							
	Yes	No	What is your		☐ Bri	itish Ci	tizen		
Have you been resident			nationality?	□ EU & EEA					
in the UK for 3 years?					☐ Other, Please State				
								<del></del>	
If No, what was your			Date of entry to	UK					
previous country of			[if not born here]			/	/		
residence									
Passport number:			Date of Issuing:				Country of	issue:	
			Expiry date:						
Birth certificate Number:			Date of Issuing:			Borough issued:			
ID card number:			Date of Issuing:			Expiry date:			
If 'other', what type of vis	a/leave t	o remain	in the UK do you	have?					
Residence card of EEA me	mber 🗆		Indefinite Leave t	o Ren	nain 🗆	]	Limited L	eave to Remain 🗆	
Spouse Visa □									
Are you a refugee? □ C	Or, any ot	her types	of evidence:					·	
Visa number:	Date of Issuing:		Visa Expiry date:						
Copy of original documents obtained for Non-EU citizen						Yes [		No 🗆	

	N 5 - Prior Attainment			
Th	e Skills Funding Agency monitors learners' attainment	levels. Ple	ase tick the highest level that you have atta	ained.
Entry L	evel (e.g. Entry Level Functional Skills English and Maths or ESOL Entry level)		Level 5 (e.g. Foundation Degree)	
Other q	ualifications below Level 1 (e.g. one module of a Level 1 qualification)		Level 6 (e.g. Degree with Honours)	
Level 1	(e.g. Functional Skills Level 1 English or Maths, ESOL Level 1)	L	evel 7 and above (e.g. Masters Degree)	
Full leve	el 2 (e.g. 5 or more grade A-C GCSE or O level, or Level 2 Certificate in Childcare)		Other qualification, level not known	
	evel 3 (e.g. 2 or more A Levels, 4 or more AS Levels, or Level 3 Diploma in Childcare)		Not known	
Lev	vel 4 (e.g. Certificate of Higher Education)		No qualifications	
	ON 6 - Support Requirements  Hers need to complete parts A and B below. If you do no	t require s	upport please also indicate this below.	
-	ou consider yourself to have a long-term disability or lead	_		
f, yes, p	ou consider yourself to have a long-term disability or lead lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes	ou.		
f, yes, p	lease tick anything of section 6.1 or 6.2 that applies to y	ou. (2)	ulties? (1) Yes (2) No (	
, yes, p	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes	ou. (2)	ulties? (1) Yes (2) No (2)	
yes, p Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes   bilities (please tick any box that applies to you)	(2) 6.2 <b>Lea</b>	ulties? (1) Yes ☐ (2) No ☐  No ☐  arning Difficulties	
, yes, p : Do yo .1 Disa	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes   bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)	(2) 6.2 <b>Lea</b>	No   Moderate learning difficulties  No I	
, yes, p : Do yo .1 Disa	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes   bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or	(2) 6.2 <b>Lea</b>	No  Moderate learning difficulties  Severe learning difficulties	
yes, p: Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes   bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)	(2) 6.2 <b>Lea</b>	No   Moderate learning difficulties  Severe learning difficulties  Dyslexia	
yes, p: Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes   bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)	(2) 6.2 <b>Lea</b>	No   No   Moderate learning difficulties  Severe learning difficulties  Dyslexia  Dyscalculia	
, yes, p : Do yo .1 Disa	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)	(2) 6.2 <b>Lea</b>	No	
yes, p: Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)  Other medical condition	(2) 6.2 <b>Lea</b>	No	
yes, p: Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)  Other medical condition  Emotional/behaviour difficulties  Mental health difficulty (eg. depression)  Temporary disability after illness/accident (eg. broken	(2) 6.2 <b>Lea</b>	In the second se	
yes, p: Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)  Other medical condition  Emotional/behaviour difficulties  Mental health difficulty (eg. depression)	6.2 Lea	Involuties? (1) Yes (2) No (3) No (4) No (4) No (5) No (6) No (7)	
yes, p	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)  Other medical condition  Emotional/behaviour difficulties  Mental health difficulty (eg. depression)  Temporary disability after illness/accident (eg. broken leg)	6.2 Lea	Involuties? (1) Yes (2) No (3) No (4) No (4) No (5) No (6) No (7)	
J. Do yo	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)  Other medical condition  Emotional/behaviour difficulties  Mental health difficulty (eg. depression)  Temporary disability after illness/accident (eg. broken leg)  Profound/complex disabilities	6.2 Lea	Involuties? (1) Yes (2) No (3) No (4) No (4) No (5) No (6) No (7)	
f, yes, p  3: Do yo  3.1 Disa	lease tick anything of section 6.1 or 6.2 that applies to you require support during your course? (1) Yes  bilities (please tick any box that applies to you)  Visual impairment (does not include wearing glasses)  Hearing impairment (eg. may need a hearing aid or communication support)  Disability affecting mobility (eg. wheelchair user)  Other physical disability (eg. cerebral palsy)  Other medical condition  Emotional/behaviour difficulties  Mental health difficulty (eg. depression)  Temporary disability after illness/accident (eg. broken leg)  Profound/complex disabilities  Asperger's Syndrome	6.2 Lea	Involuties? (1) Yes (2) No (3) No (4) No (4) No (5) No (6) No (7)	

SECTION 7 - Employment Status and monitoring							
7.1 Unemployed  What is your unemploymen	at atatus?						
(11) Not in paid employmen		Economically Inactive eg: retired/carer/long ter 14-19 NEET □	m sick 🛚				
If you are unemployed - are	you in receipt of any of the foll	lowing benefits - (if yes, please provide current evider	nce of benefits)				
(01) Job Seekers Allowance (JSA) □ (02) Employment support allowance (ESA) □ (03) Learner is in receipt of another state benefit other than JSA or ESA (WRAG) □ * (04) Universal Credit □							
*Receives other state benefit and earns less than 16 times the age-related rate, or £338 a month (individual claim) or £541 a month (household claim) evidence must be provided — copy of a wage slip dated within 3 months.							
(01) unemployed for less than 6 months							
7.2 Employed							
I am currently in employme Employment	nt and have a Contract of  Yes  No	Employers Name					
I have been employed since							
Employers Postcode							
My job role is: Employment Intensity Indicators (Mandatory):							
I am <b>Self Employed</b> since	(month/year)	(1) Learner is employed for 0 to 10 hours per week ☐ (2) Learner is employed for 11 to 20 hours per week ☐					
and I have registered my Se	lf Employment with HM	(3) Learner is employed for 21 to 30 hours per week					
Revenue and Customs							
(4) Learner is employed for 31+ hours per week							
Low Wage:							
You may be entitled to receive full funding based on your income, if you earn less than the London Living Wage as an annual gross salary £20,962 on your start date. Learners will be deemed to earn less than the London Living Wage as an annual gross salary if they earn less than the hourly London Living Wage at that point in time, multiplied by 37.5 (hours per week), multiplied by 52 (weeks per year). If this applies, please tick the box.							
If this applies, you will need to provide evidence of your earnings - This could be a wage slip or a Universal Credit statement within 3 months of the learner's learning start date, or a current employment contract which states gross monthly/annual wages.							
SECTION 8 - ESFA REQUIREMENT - Please tick which of the following statements:							
☐ 1. No member of the household in which I live (including myself) is employed – one or more dependent children							
2. No member of the I	household in which I live (includ	ling myself) is employed – No dependent children					
3. I am a single adult vinactive) in the housel	<del>-</del>	ildren (aged 0-17 years or 18-24 years, if full time stud	lent or				
99. None of these stat	tements apply						

## **SECTION 9 - How We Use Your Personal Information**

The Greater London Authority (GLA) is London's regional government. The Mayor of London provides Citywide leadership, and the London Assembly is a watchdog for London responsible for holding the Mayor and his advisers to public account. Find out more about what we do and who we work with at <a href="https://www.london.gov.uk">www.london.gov.uk</a>.

The Mayor of London is responsible for the Adult Education Budget (AEB) in London and the funding provided for your course. This funding is being used to 'match fund' a European Social Fund (ESF) programme for residents in Greater London.

The majority of the information provided by you in this Enrolment Form is collected by Education and Skills Funding Agency (ESFA) under its privacy notice (see below). This information is shared with the GLA, which operates as a data controller of your personal data under relevant data protection law. The GLA is required to process your personal data to enable it to carry out its functions and statutory responsibilities including reporting to the Department of Work and Pensions (DWP) on the 'match funding' of ESF programmes. In addition, the GLA collects some supplementary information to comply with ESF requirements, for which the DWP is the data controller.

Information about use of and access to your personal data held by the GLA, details of organisations with whom the GLA regularly share data, information about how long the GLA retain your data, and how to exercise your rights is set out in the GLA AEB Procured Privacy Notice (https://www.london.gov.uk/sites/default/files/2019-07-30 aeb procured privacy notice .pdf)

### The ESFA's Privacy Notice

The ESFA has issued this privacy notice, 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 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 used for education, training, employment and well-being related purposes, including for research.

The DfE and the English ESF Managing Authority (or agents acting on their behalf) may contact you in order for them to carry out research and evaluation to inform the effectiveness of training. Your information may also be shared with other third parties for the above purposes, but only where the law allows it and the sharing is in compliance with data protection legislation.

You can agree to be co	ontacted by other third parti	es by ticking any of the following boxes:	
About courses or learr	ning opportunities. 🗖	For surveys and research. $\square$	
By post. 🗖	By phone. 🗖	By e-mail. □	
shares data, information	about how long it retains your	sonal data held by the ESFA, details of organisations with whom it reg data, and how to change your consent to being contacted, please view publications/esfa-privacy-notice)	•
Learner Declaration			
I confirm that I have be information with releva		Privacy Notices in relation to my enrolment and I agree to share this	
Print Name:		Signature:	
Marketing & Publicity  I give my permission	for images taken by the London	learning Consortium (LLC)/The Training Provider, which include me, t	o be

used for promotional purposes. I give my permission for the LLC/Training Provider to follow me on Twitter and request to be

my friend on Facebook. By ticking this box, you will be giving permission.

SECTION 10 - Pre-Entry Information, Advice	and Guidance / Initial Assessment:					
·	formation, Advice and Guidance, and that the following areas have					
been covered with me:	,					
The Choice of the Learning Program	mme					
Entry requirements for each Learn	ing Aim within the Learning Programme					
An Initial Assessment of the suitab	ility of the Learning Programme					
Discussion around what I can do to	o further developing my English & maths skills					
Support available to me						
☐ The nature and procedures involve	ed in the process of Advice and Guidance					
* Recognition of prior Learning (RF	PL) and Accreditation of Prior Learning					
Progression pathway discussed						
*Note						
Recognition of prior learning (RPL) is an ass	sessment method. It considers whether a learner meets the					
requirements for a unit or qualification thr develop them through additional learning.	ough existing knowledge, understanding or skills and does not need to					
APEL is the process for assessing, recognisi	ng and/or awarding credit from learning that has been achieved through					
experience and/or training that has not be	en formally assessed. Where credits are given, they should be given for					
learning, not for experience alone.						
Your tutor/assessor will discuss this in more detail with you as part of the development of your individual learning						
plan.						
SECTION 11 - Safeguarding Children, Young I	Doonlo and Vulnorable Adults					
• • • • • • • • • • • • • • • • • • • •	them succeed. For some careers you will need to declare all criminal					
	Doing this will not necessarily stop you being offered a place on a course.					
•	n, your adviser will discuss the next steps and your options.					
If you are unsure about what to declare then please seek advice from our recruitment Team or ask a careers advisor						
at the National Careers Service at https://nationalcareersservice.direct.gov.uk/aboutus/contactus  I have a criminal conviction and need to make a disclosure and have attached the information in a separate						
envelope.	lake a disclosure and have attached the information in a separate					
chvelope.	Yes □ No □					
INFORMATION, ADVICE & GUIDANCE						
Tell us about you						
•	lo this course? (Tell us about your ambitions, goals or aspirations)					
Trinat are year reasons for training to s	to the obtained (Toll do about your ambilione, goale of appliations)					
What previous learning or work experie	ence do you have that would be useful for this course?					
·						
Additional Lagrana Cont	Identified an applicant fr					
Additional Learner Support	Identified on enrolment form					
Additional Cupport II Cara com	mitted to supporting all our learners to achieve to the best of					

Additional Support - LLC are committed to supporting all our learners to achieve to the best of their ability and can provide additional support where learners request help. Please let us know if you have any barriers or support needs that might hinder your learning or achieving your goals/aspirations (ie learning support needs, family commitments, previous criminal convictions, health conditions, medication you are taking, childcare commitments etc), so that we can best support or signpost support for you.

Please descr	ibe any barrier(s) that could affect your learning:							
Additional Po	rsonal Commitment:							
Additional Pe	rsonal Communent.							
Initial Asses	sment Results							
Maths	ICT							
English	Other ie free writing exercise/diagnostics							
What are you	r next steps? How can we support you?							
Course details								
Entry requirem	ents							
Advice on progression pathways								
Outcome of In	nterview							
☐ Uncondition	nal Offer - provide course details							
Conditional	course offer – pls note conditions below							
	Manager/tutor for guidance							
Referral/signposting to external organisation – provide details								
Unable to offer a course/referral								
Follow Up action Required ie assessment of free writing, DBS checks, work placement sourcing etc:								
Please confirm								
	rse information (i.e. leaflet) has been given to the learner							
	support needs have been discussed with the learner Its discussed with the learner							
☐ Options for further development of English and maths discussed with the learner								
	and course expectations discussed							
	k discussed (if applicable)							
	discussed (if applicable)							
	course discussed (if applicable)							

SECTION 12: COURSE DI	ETAILS/LEARNING DELIVE	RY - TO BE COMPLE	TED BY	A MEMBER OF STAFF
Learning Aim Code:		Awarding Body & Registration Number	•	
Course Name:			GLH:	
Start Date:		Planned End Date:		
Venue & Delivery Postcode:		Tutor Name:		
Any Units Achieved / RPL?	No Yes			
		Awarding Body &		
Learning Aim Code:		Registration Number	•	
Course Name:			GLH:	
Start Date:		Planned End Date:		
Venue & Delivery Postcode:		Tutor Name:		
Any Units Achieved / RPL?	No Yes			
Learning Aim Code:		Awarding Body & Registration Number		
Course Name:			GLH:	
Start Date:		Planned End Date:		
Venue & Delivery Postcode:		Tutor Name:		
Any Units Achieved / RPL?	No Yes			
Learning Aim Code:		Awarding Body & Registration Number		
Course Name:			GLH:	
Start Date:		Planned End Date:		
Venue & Delivery Postcode:		Tutor Name:		
Any Units Achieved / RPL?	No Yes			
		Awarding Pady G		
Learning Aim Code:		Awarding Body & Registration Number		
Course Name:			GLH:	
Start Date:		Planned End Date:		
Venue & Delivery Postcode:		Tutor Name:		
Any Units Achieved / RPL?	No Yes			

(For regulated activity, learners <u>MUST NOT</u> be inputted in PICs until they are registered with awarding body.

If learners are not registered, please raise this with the Administration Manager as they cannot be entered onto PICs).

## **SECTION 13 - Provider Declaration:**

I am satisfied that the learner has met the entry requirements for the programme of study and evidence has been seen (where applicable) and that the learner is enrolling on an appropriate programme of study. The learner has produced appropriate and satisfactory references (where applicable). I have used the PLR to indicate the level of qualification achieved by the learner prior to enrolment.

15.1 Evidence of Add Eligibility Confirmed and s		nent seen				
Type of evidence provided	I (must be dated	within last 3	months):			
Benefit letter ☐ Utility Driving Licence ☐ Othe		count/credi	t card statemer	it □ Ten	ancy agreement C	Council tax bill □
15.2 <b>Evidence of Res</b> iligibility Confirmed and s	-	nent seen				
Type of evidence provided	l ie birth certifica	te, passport				
Birth/adoption certificate Residency permits □ 1	□ UK Passpo Marriage/civil pa		U Passport □ rtificate □	Visa ☐ Other:	Indefinite leave	to remain $\square$
15.3 <b>Evidence of Une</b> Eligibility Confirmed and s	• •					
Type of evidence provided	l ie bank stateme	nt, JCP lette	r (must be date	d within la	st 3 months)	
DWP/Jobcentre Plus letter	r□ JSA □	ESA 🗆	Other:		Date	of Issuing:
15.4 Confirmation of	Economically	Inactive				
Please specify Date of Issuing:						
15.5 Evidence of Low	wage seen					
Please specify Type of evi	dence					
Please specify Period cove	ered					
Please specify Low wage	Amount					
Evidence checked and	d completed w	vith learne	er			
PLR						Yes / No
Initial Assessment						Yes / No
Advice and Guidance						Yes / No
Individual Learning Plan						Yes / No
Confirmation of Europe	an Social Fundir	ng				Yes / No
PROVIDER DECLARATION I am satisfied that the learn applicable) and that the lea satisfactory references (whe to enrolment.  Advisor Name	er has met the er rner is enrolling c	on an approp	oriate programi	ne of study	v. The learner has p	roduced appropriate and
Advisor Signature						
Date						

## SECTION 14 - LEARNER LEARNING AGREEMENT AND DECLARATION - I understand that:

- LLC/The Training Provider will respond to reference requests from employers.
- LLC/The Training Provider will supply attendance, progress data to third parties, who have paid fees on my behalf.
- I have been made aware that European Social Funds part funds my learning programme.
- I have been informed by my Training Provider that my course is being funded by the GLA.
- I have been informed by my Training Provider that LLC is the awarding agent for my learning.
- I will inform LLC/The Training Provider of any change of information during my course of study.
- I agree to abide by the LLC/The Training provider's Policies & Procedures and follow all rules.
- I have received advice and guidance on my choice of learning programme to assess my suitability in accordance with LLC/The Training Provider's procedures.
- I am aware that LLC/The Training Provider will share data with OFSTED and awarding bodies and that they will store their data on computer

## 12.1 LEARNER DECLARATION:

- By signing the Enrolment Form and Learning Agreement I confirm the contents are true and accurate and no material information has been omitted or falsely declared.
- I agree to abide by London Learning Consortium's/The Training Provider's rules, regulations, policies and procedures. I understand that declaring false information may lead to prosecution. LLC/The Training Provider may also attempt to reclaim any tuition fees and support costs provided.
- I have had an opportunity to read and understand the information above and I agree to the Learner Declaration and Learning Agreement.

Learners Signature: .	Date:	Date:			
Adviser Name					
Adviser Signature	Date				