FOR OFFICE USE ONLY						
REFERENCE:	SUB CONTRACTOR: (Name or stamp)					





2017-2018 Student Enrolment & Learning Agreement Form

1. Personal I	Details																		
Title:	Mrs	Miss	Ms	Mr	Dr	Rev	Sir	Prof	Date of Birth:			/		/					
Surname:									ULN No:										
Forename(s):								N.I No:										
Corresponde	nce Addre	SS:							Car Reg:										
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Post Code: Time at Curre	nt Addre		•••••	•••••	Years			Months	Email:			•••••							
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Tel No:								 	Name:										
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E-mail:);e+b.			•••••		•••••		······	Email:	•••••		•••••						••••••	
Surname at E	oll fili:								Relationship:										
Nationality:									If No, for purposes Economic Area for				ie euud	alion	nave y	ou iiveu	III LIIE EU	гореан	
For purposes	other tha	n education	n have y	ou lived i	in Englar	nd for the	last 3 y	ears?	Yes	No									
Yes	No)							Have you attended	a cou	rse at	Cravei	n Colle	ge bef	ore?	Yes		N	0
2 Favel One	outmitio	Informati	on (Dr	widing t	hia infa	um ation	daaa wat	in any way	ffoot vous place on		·aa)								
Do you consi									ffect your place on a	a cour	No	-							
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If yes, please (If you wish to id						taff)	U	otion 2:	Option 3	} :			Optio	n 4:			Option	5:	
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5 Hearing Impairment6 Disability Affecting Mobility13 Dyscalculia							94 95						ty (e.g. Dy lepsy, as						
7 Profoun	d Comple	x Disabiliti	es				-	na pectrum Disc	ırder		96		Learni				πορού, ασ	illilla, ula	שטנטי
		nal Difficu	Ities					's Syndrome			97		Disabi	-					
	Health Di [.] te Learnin	mcurty g Difficulty	y					ry Disability .anguage & C	ommunication Needs		98	Preie	r Not to	0 29A					
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3. Highest Qualification Level Currently Held Entry Level – Word Power/Number Power (09)	Full Level 3 – 2 or more A Levels, 4 or more AS Levels, NVQ 3, AVCE, National					
Other Qualifications – Below Level 1 (07)	Diploma or Certificate (03)					
Level 1 – GCSE/O Level grades D–G (or fewer than 5 at grades A–C), GNVQ	Level 4 – HNC, CMS, NVQ 4 (10)					
Foundation, CSE below grade 1, NVQ 1 (01)	Level 5 - HND, First Degree, Foundation Degree (11)					
Full Level 2 – 5 or more GCSE/O Level grades A–C, 5 or more CSE Grade 1, NVQ 2, GNVQ Intermediate, 1st Diploma (O2)	Level 6 - Bachelors Degree, Award/Certificate/Diploma Level 6 (12) Level 7 - Doctorates, Masters Degree, Award/Certificate/Diploma Level 7 (13)					
Previous School (full-time learners only):						
Are you enrolled at any other school, college or training provider? Yes (If yes, please s	peak to a member of staff) No					
4. First Full Level 2/3 Qualifications – Entitlement to tuition fee remission						
You may be eligible for a reduction in course fees if your chosen programme of study results between 19 and 23. Please speak to our reception staff for further details. I understand that the tuition fees and any support costs due.	s in you achieving a recognised full Level 2/3 qualification qualification and aged t if I have declared false information the College may take action against me to reclaim					
I declare that I do not already have a: Full Level 2 qualification or above	Full Level 3 qualification or above					
PLEASE ENSURE YOU HAVE COMP	LETED SECTION THREE ABOVE					
5a. Employment Status Day Before Starting Learning						
Employed	lot Employed					
In paid employment - under 16 hours per week (10)(2)	Not in paid employment and looking for work (11)					
In paid employment - 16-19 hours per week (10)(3)	Not in paid employment and not looking for work (12)					
In paid employment - 20 hours or more per week (10)(4)	In full-time education prior to the start of the course					
Self employed (10) Hours worked per week: < 16 hours 16-19 hours > 20 hours	Retired					
Date commenced current employment:	Date from which you were not employed: (please complete section 5b)					
5b. If Not Employed: How many months have you been unemployed?						
Less than 6 months (1) 6 – 11 months (2) 12 – 23 month	ns (3) 24 – 35 months (4) Over 36 months (5)					
5c. Employer Details						
If your employer is paying all or part of your fees please complete this section						
Employer Name:						
Employer Address:						
Employer Email:						
Employer Phone:						
Tick here if your employer is releasing you to allow you to study on your course/s (1)						
5d. Household Situation						
No household member is in employment and the household includes one or more dependent children (1)	Learner lives in a single adult household with dependent children (3)					
No household member is in employment and the household does not include any dependent children (2) Prefer not to say (98) Not applicable (99)						

2017–2018 Student Enrolment & Learning Agreement Form



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6a. Fee Payment Details - How are the fees	being paid?		
Employer Delegate	Other (please specify)		24 + FE Loan (proof of acceptance letter must be attached)
FOR OFFICE USE ONLY - Fees waived by Coll	ege		
6b. Eligibily for Reduction in Fees			
You may be eligible for reduced fees if your coul	rse results in you achieving your first full level	2/3 qualifications or if you receive an eligible b	enefit and are seeking employment.
First Full Level 2 First Full Level 3	Please make sure you have compl	eted Section 4 if you have ticked eithe	r of these boxes
Are you? In receipt of Job Seekers Allowance (JSA)	In receipt of Employment Support Allowance (WRAG)	Unemployed on Universal Credit and actively seeking work	Unemployed, in receipt of another benefit and actively seeking work (You must sign an additional declaration confirming this)
6. Declaration of Student			
Initial Advice and Guidance I confirm that as part of initial guidance, enrolm - did identify your primary learning goals and pr - met the appropriate entry requirements for thi - understood what your programme of study inv - were aware of the financial and/or transport s - were aware of the learning, language, and aca	ogramme of study is programme of study olved, including any fees liability and additiona upport you may be entitled to	l costs for essential equipment, awarding body	fees, books and visits etc.
 I declare that, to the best of my knowledge, the Tyro Training immediately I agree to attend regularly and punctually all cells agree that I am responsible for unless on medical grounds or where the training of the second second	e information I have provided is correct and the ourses for which I enrol and conform to the reg the payment of the course fees and the he reason for withdrawal is directly at e's Debt Collection Agents. A debt reconstruction o pay the difference in the fees involved in to change tutors, reschedule, cancel, close o	gulations of the College at the fees remain payable even if I sultributable to Tyro Training. Fees not payovery administration charge of 15% with a combine courses if necessary	ny eligibility for concessionary fees, I will notify bsequently withdraw from the course id in full within 60 days of the invoice
Students under 19 on the 31 August 2017 - with my employers for the duration of my course what I go on to do at the end of my course.			
Any student who fails to attend an examination fails awarding body exam/registration fee.	for which they have been entered and is unable	to provide satisfactory mitigating circumstance	es for non-attendance, will be charged the full
The College aims to provide a quality educationa College and the commitment expected from you			
Your personal information is used by the DfE to and to create and maintain a unique learner num well-being related purposes, including for resear Social Fund (ESF) Managing Authority (or agents You can opt out of contact for other purposes by	ber (ULN) and a personal learning record (PLR rch. This will only take place where the law allo s acting on its behalf) may contact you in order). Your information may be shared with third pa ws it and the sharing is in compliance with the for them to carry out research and evaluation t	rties for education, training, employment and Data Protection Act 1998. The English European
About courses or Learning opportunities	For surveys and research	Post Telephone	Email
Further information about use of and access to y https://www.gov.uk/government/publications/e		with whom we regularly share data are availab	le at:
College activity is part-financed by the European	u Union through the European Social Fund (ESF). ESF supports activities to extend employment	opportunities and develop a skilled workforce.
By completing this form I agree to undertake ap Act 1998, and for educational purposes only. At I may contact the College Data Protection Office	no time will your personal information be pass	nsent for Craven College to process data held a ed to organisations for marketing or sales purp	bout me in compliance with the Data Protection oses. If I have any concerns regarding this data

I confirm that I have been made aware of the College's Fees and Refund Policy (available on the College website). I also agree that I am responsible for the payment of the course fees and that the fees remain payable even if I subsequently withdraw from the course unless on medical grounds (doctors certificate/letter required) or where the reason for withdrawal is directly attributable to the College.

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PLEASE NOTE THAT FOR YOUR COMFORT AND SAFETY CRAVEN COLLEGE OPERATES A NO SMOKING POLICY

* Not applicable when employer has contracted for the delivery of training

2017–2018 Student Enrolment & Learning Agreement Form



7. Declaration Signature							
I confirm that I have been made aware of Tyro Training's 'fees and charging' policy (available on the Tyro Training website). I also agree that I am responsible for the payment of the course fees and that the fees remain payable even if I subsequently withdraw from the course unless on medical grounds (doctors certificate/letter required) or where the reason for withdrawal is directly attributable to Tyro Training.*							
Where your employer has paid for	all, or part of, the cost of your course, or has allowed you to attend the course during your normal working hours, it is our normal practice to send your certificate direct to your employer.						
By signing, you give your consent to t	his practice, agree to the terms and conditions overleaf and confirm the details provided are accurate.						
, , , , , ,							
Student Signature:	Date: /						
FOR OFFICE USE ONLY - Fee remission for Unemplo	yed						
Evidence seen, where relevant							
National Insurance Number:	Date of evidence:						
Staff signature:	Date: / /						
FOR OFFICE USE ONLY - ID checked - Staff Signature							
Indentity checked							
Passport (2)	Cert. of Entitlement to Funding (6)						
Driving Licence (3)	Examination results slip/certificate						
ID card/other National ID (4)	Returning student known to Tyro Training						
National Insurance card (5)	Other - specify below						
Bank credit/debit card (6)							
Tutor signature:	Date: /						

FOR OFFICE USE ONLY	
Course Code	
Trainer	
Course Title	
Start Date	
End Date	
Days	
No. Sessions	
Hours Per Session	
Total GLH	
Invoice Number	