

# Enrolment Form

## & Learner Agreement 2008/09

Learner Number  C PE PSTelephone Enrolment:  Checked By:  On TERMS: Date Received:  Time Received: 

Please complete all areas of this form (grey shaded boxes - office use only) and return to the address on page 31.

### 1. Personal Details (Please write full name in BLOCK CAPITALS)

Surname	<input type="text"/>
Forenames	<input type="text"/>
Title	Mr Mrs Miss Ms Other
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Female <input type="checkbox"/> Male <input type="checkbox"/>
Address	<input type="text"/>
	<input type="text"/>
	Postcode <input type="text"/>
Tel. Day	<input type="text"/>
Tel. Evening	<input type="text"/>
Tel. Mobile	<input type="text"/>
E-mail	<input type="text"/>

### 2. Qualifications Already Held

Please tick your highest qualification level (in any subject)

<input type="checkbox"/> No Qualifications	<input type="checkbox"/> Lower than NVQ Level 1
<input type="checkbox"/> CSEs at Grade 1 – How many? <input type="text"/>	
<input type="checkbox"/> Less than 5 GCSEs/O Levels Grade D-G	<input type="checkbox"/> NVQ Level 1
<input type="checkbox"/> 1 AS level	
<input type="checkbox"/> 5 or more GCSEs/O levels Grade A-C	<input type="checkbox"/> NVQ Full level 2
<input type="checkbox"/> 2 or 3 AS levels/ 1 A level	
<input type="checkbox"/> 2 A levels/4+ AS levels	<input type="checkbox"/> NVQ Full Level 3
<input type="checkbox"/> ONC/OND	
<input type="checkbox"/> Degree/HNC/HND	<input type="checkbox"/> NVQ Level 4
<input type="checkbox"/> Post Graduate	<input type="checkbox"/> NVQ Level 5

Other Qualification (please specify)

### 3. Residence Details

Nationality - as on passport

Main Country of Residence for past 3 years

Date of entry into the UK

Are you a Refugee? Yes  No

Are you an Asylum Seeker? Yes  No

### 4. Ethnic Origin

This information is used by New Directions to ensure that we are serving all members of the community.

- 11 - Asian or Asian British - Bangladeshi
- 12 - Asian or Asian British - Indian
- 13 - Asian or Asian British - Pakistani
- 14 - Any other Asian background
- 15 - Black or Black British - African
- 16 - Black or Black British - Caribbean
- 17 - Any other Black 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 White background
- 98 - Any other

### 5. Learning Support & Disabilities

In order for us to support you during your studies please complete the following:

Do you have a:

Disability (e.g. mobility, hearing, sight) Yes  No

Learning Difficulty (e.g. dyslexia) Yes  No

If Yes please give details

Are you willing for this information to be disclosed to the tutor?

Yes  No

Would you like a member of staff from our Learner Support Team to contact you?

Yes  No

### 6. How did you hear about New Directions/this course?

- Previously attended course  Leaflet
- Website/ Internet  Word of Mouth
- Newspaper Advert  Other
- Advert in Publication (Please specify)

Please tell us how or where you obtained this Guide

- Delivered to your home  Community Centre
- Library  Leisure Centre

Other (Please specify)

Please complete, sign & return this form together with your payment & evidence if applicable to:  
**New Directions, Customer Relations Team,**  
**Central Reading Centre, Thames Tower,**  
**37 - 45 Station Road, Reading, RG1 1 LX**

## 7. Reduced Fee/ Fee Remissions

I am claiming a fee remission - please tick one box only.

- 01 - 16-18 at 31/08/08
- 04 - Income Support (Employment Support Allowance)
- 04 - Housing Benefit/ Council Tax Benefit
- 08 - An unwaged dependent of a person in codes 04, 15, 21
- 15 - Unemployed in receipt of Jobseekers' Allowance
- 21 - Working Tax Credit
- 23 - Pensions Guarantee Credit

 Your Reading Passport (YRP) - No.

 YRP Concessionary - No.

## 8. Course Details

Course Code	Course Title	Start Date	£ Payment
Total Fee			

## 9. Payment

Please complete and tick boxes where applicable

- Cash
- Cheque/ Postal Order - payable to 'Reading Borough Council'
- Standing Order (Please contact an Enrolment Advisor)

For the amount of: £

I authorise you to debit my  
MASTERCARD / VISA / SWITCH / DELTA card No.

Valid from date:     Expiry date:

Issue No: (Only Switch)

For the amount of: £

Date:

Name of cardholder: (If different from above)

Signature:

This form is available in large print format.  
Please call us on 0845 842 0012 for your copy.

## Office Use Only

Course Code	Actual Learner Start Date	Actual Learner End Date	Expected GLH	Authorised By

Course Code	Amount 1st/2nd	Receipt No.	Account Code	Date	Initial

**Crèche Booking Form** \* Crèche is offered subject to sufficient demand.

Before completing this part of the form, please ensure that the centre you wish to attend offers Crèche facilities.

Parent's Name:

Child's Name:

Child's DOB:

Tel Day:

Fee per Session: £  Full: £

Subsidised: £

Course Code	Day	Time

## 10. Learner Agreement & Declaration

My Signature on this form confirms that I:

- Have received suitable information and advice to help me in the choice of the most appropriate learning programme.
- Understand the work involved to succeed in my chosen learning programme.
- Have received information on learning and financial support available to me.
- Understand and accept the policies of New Directions on Fees and Fee Remission as stated.
- Agree to comply with the policies and procedures of New Directions.
- Accept liability for payment of the stated fees.
- New Directions reserves the right to charge the full course fee should a learner enrol with more than one provider on the same funded learning programme.

I accept that New Directions refunds fees:

- When New Directions cancels a course for any reason.

Partial refunds are given:

- For long-term learner sickness (including pregnancy related sickness). Written proof is required. This refund is pro-rata.
- When written notice of withdrawal from a course is submitted to the Customer Relations Team, at least 6 working days prior to the start of the course.

All partial refunds are subject to a £10 administration fee.

Signature:

Date:



**Data Protection Act 1998.** The information you provide on this form will be passed to the Learning and Skills Council (the LSC). The LSC is responsible for funding and planning education and training for young people and adults in England, and is registered under the Data Protection Act 1998. The information you provide will be shared with other organisations for the purpose of administration, careers and other guidance, and statistical and research purposes. Other organisations with which we will share information include, the Department for Education and Skills, Connexions, Higher Education Statistics Agency, Higher Education funding Council for England, educational institutions and organisations performing research and statistical work on behalf of the LSC or its partners. The LSC also administers the learner registration service (LRS) which will use your information to create and maintain a unique learner number (ULN). The LSC is also a co-financing organisation and uses European Social funds from the European Union to directly or indirectly part-finance learning activities, helping develop employment by promoting employability, business spirit and equal opportunities, and investing in human resources. Further information about partner organisations and the ULN and what they do, may be found at [www.lsc.gov.uk/providers/data/help/](http://www.lsc.gov.uk/providers/data/help/) and by following the links to data protection. protection. At no time will your personal information be passed to organisations for marketing or sales purposes. From time to time students are approached to take part in surveys by mail and phone, which are aimed at enabling the LSC and its partners to monitor performance, improve quality and plan future provision.

Tick box A if you wish to be contacted by the LSC or its partners in respect of surveys and research.  A

The LSC values your view on the education or training which you receive, and will use these to help bring about improvements for learners in England. The LSC or its partners may wish to contact you from time to time about courses, or learning opportunities relevant to you.

Please tick box B if you wish to be contacted about courses or learning opportunities by post.  B