



Community Learning Enrolment Form

Adult, Community & Family Learning

Please complete ALL sections of this form

Personal Details

Title: Mr Mrs Miss Ms

Gender: Male Female Transgender

First Name(s) _____

Date of Birth _____

Surname _____

Telephone _____

Address _____

Mobile _____

_____ Postcode _____

Email _____

Have you been a resident in the UK or EU for the last 3 years? Yes No

(If you are a UK national who has been residing **outside** the UK or EU for any period of time in the last 3 years then you must also answer NO. You may be required to provide evidence of your status in the UK)

Date of entry to the UK (if appropriate) _____

Nationality _____ Country of origin _____

Please indicate your status in the UK

- British Citizen
- EU Citizen
- Asylum Seeker
- Refugee
- Indefinite Leave to Remain
- Student Visa
- Spouse Visa

We offer a range of additional support for learners. To help us help you, please tell us if you have a learning difficulty or impairment affecting learning, such as dyslexia, sensory impairment, mental health difficulty and or a physical impairment affecting mobility etc.

Do you have a learning difficulty and or disability? Yes No

If yes please state difficulty/disability _____

The following information will help us make sure that our courses and services reach the communities we are targeting.

Ethnicity

White

- English/Welsh/Scottish/Northern Irish/British
- Irish
- Gypsy or Irish Traveller
- Other

Mixed

- White & Black Caribbean
- White & Black African
- White & Asian
- Other

Asian

- Indian
- Pakistani
- Bangladeshi
- Chinese
- Other

Black

- African
- Caribbean
- Other

Other

- Arab
- Any Other

Sexual orientation

- Bisexual
 - Gay Woman/Lesbian
 - Gay Man
 - Heterosexual
 - Prefer not to say
- Other: (please specify) _____

Religion and belief

- Buddhism
 - Christianity
 - Hinduism
 - Islam
 - Jainism
 - Judaism
 - Sikh
 - Zoroastrian
 - No religion/Atheist
 - Prefer not to say
- Other: (please specify) _____

Please Turn Over





Qualifications

Please indicate the highest qualification that you have:

- No Qualification
- Overseas Qualifications, level not known
- Entry Level: Certificate in adult literacy, numeracy or ESOL Skills for Life
- Level 1: 5 or more GCSE/O levels at grades D-G or fewer than 5 at grades A-C
- Level 2: 5 or more GCSE/O levels at grades A-C, 5 or more CSE grade 1 or 1 A level
- Level 3: 2 or more A level passes, 4 or more AS levels, NVQ level 3, BTEC
- Level 4: Degree or higher degree HNC, HND or NVQ level 4
- Level 5: MA, MSc; PhD

Other _____

GCSE in English Yes No Grade _____

GCSE in Maths Yes No Grade _____

Have you participated in any learning before including informal/club learning?

Yes No

If Yes, then please indicate when you were last in learning

- Less than 2 years ago
- 2-5 years ago
- 6-10 years ago
- More than 10 years ago



Benefits

Learners on the following benefits may be eligible for a reduced fee (please note that evidence of benefits will be required at the time of enrolment)

- Job Seekers Allowance
- Employment and Support Allowance in the Work Related Activity Group
- Council Tax
- Housing Benefits
- Universal/Pension/Tax Credits
- Other (please specify) _____

How did you find out about this course

- Brochure
- From a school or children's centre
- From the library
- From a friend or relative
- From the Internet
- Other _____

Course Information

Course Title _____ Start Date _____

Start Time _____

Course Venue _____ Course Fee £ _____

Data Protection and Declaration

Some of the information you supply will be used by the Skills Funding Agency and Harrow Council to fulfil its statutory functions, issue/verify your Unique Learner Number (ULN) and update/check your Personal Learning Record band progression. Further details of how your information is processed and shared can be found at www.learningrecordsservice.org.uk/privacynotice and www.harrow.gov.uk/privacy

Please tick the following:

- I do not wish to be contacted about courses or learning opportunities
- I do not wish to be contacted for surveys and research
- I do not wish to be contacted by: telephone email postal mail
- I understand that I may be contacted by SMS where it relates to a course I am currently undertaking.

I declare that to the best of my knowledge, the information I have provided on this form is correct. I have read the above statement on data protection. I understand that I and my class may be subject to video and photography from time to time. I allow my image to be used for publicity and marketing purposes of Adult, Community & Family Learning. I understand that if, at any point, I withdraw this permission I will let the photographer know.

Signature _____

Date _____

For further information please contact: Adult, Community and Family Learning • 020 8901 2691 • www.learninharrow.org.uk