**Havant & South Downs College 2018/19**

**Higher Education and Part-time Enrolment Form & Learning Agreement**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | *For office use only*  Student Reference No: | |
| **Student Information** | | | | | |
| Title: Surname/Family Name: | | | | | |
| First Name(s) in full: | | | | | |
| Name you prefer to be known by: | | | | | |
| Previous name (if applicable): | | | | | |
| Address: | | | | | |
|  | | | Postcode: | | |
| if you’ve changed address within the last 3 years please provide previous Postcode: | | | | | |
| Date of Birth (dd/mm/yyyy): | | | Sex: Male □ Female □ Other □ | | |
| Home Tel No: | | | Mobile No: | | |
| Email address: | | | National Insurance Number: | | |
| **Please indicate your ethnic group:**  **please tick ONE box** | | | | | |
| White  * English/Welsh/Scottish/Northern Irish/British * Irish * Gypsy or Irish Traveller * Any Other White Background   **Mixed/Multiple ethnic groups**   * White and Black Caribbean * White and Black African * White and Asian * Any other Mixed/multiple ethnic background   **Asian/Asian British**   * Indian | | | * Pakistani * Bangladeshi * Chinese * Any other Asian background   **Black/African/Caribbean/Black British**   * African * Caribbean * Any other Black/African/Caribbean background   **Other ethnic group**   * Arab * Any other ethnic group | | |
| **Have you lived outside the European Economic Area during the last 3 years?** **Yes □ No □** | | | | | |
| If **yes** please:- | give date of entry/return into the EEA (dd/mm/yyyy): | | | | **Staff Use – please ensure this is signed to indicate that residency has been established**  Staff Signature:  Date: |
| inform us where you have lived during this time: | | | |
| indicate your current Visa status | * + Entering the UK to accompany parent/husband/wife   + Entering the UK as a student (Student Visa)   + Granted leave to enter/remain in the UK   + Asylum Seeker / Refugee / Indefinite Stay   + Other | | |
| Do you have a criminal conviction (excluding minor motoring offences)? **Yes □ No □**  *If yes, a meeting may be arranged to discuss your record as part of our safeguarding arrangements. Failure to disclose this information may result in exclusion from College.* | | | | | |

|  |  |
| --- | --- |
| **Prior Attainment/Highest Previous Qualifications –** The government subsidises your course, through the Educations & Skills Funding Agency (ESFA) and is particularly interested to know the **level of your highest qualification** before you started the course in order to monitor government targets of improving people’s qualifications. **Please tick ONE box** | |
| * Entry Level (*Basic Entry Level, E)* * Qualifications below Level 1 (Pre-entry) * Level 1 (5GCSEs D-G/3-1; 1 AS Level; GNVQ Foundation; BTEC First Certificate) * Full Level 2 (5 GCSEs A\*-C/9-4; NVQ2; 2 or 3 AS Levels; GNVQ Intermediate; BTEC First Diploma) * Full Level 3 (4 AS Level; 2 A2/A Level; NVQ3; BTEC Diploma/Extended Diploma/Access to HE) | * Level 4 (Certificate of Higher Education; HNC) * Level 5 (Foundation Degree; HND) * Level 6 (Bachelor’s Degree; Graduate qualification) * Level 7 or above (Master’s Degree; Postgraduate qualification; Doctorate) * Other qualification; level not known * No qualifications * Not known |

|  |  |  |
| --- | --- | --- |
| **Next of Kin Information** | | |
| Emergency contact name: | | Relationship: |
| Mobile telephone no: | Home telephone no: | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Disability, Learning Difficulty and or Health Problem – please tick all that apply, if no option is indicated the starred \* option will be selected** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you consider that you have a learning difficulty, disability or health problem?  Yes □ \*No □ Other □ *Please specify:* | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Allergy * Asperger’s Syndrome * Asthma * Autism Spectrum Condition * Cystic Fibrosis * Diabetes * Disability Affecting Mobility * Dyscalculia | | | | | * Dyslexia * Epilepsy * Hearing Impairment * Diagnosed mental health condition * Moderate Learning Difficulty * Physical Disability * Other Specific Learning Difficulty e.g. Dyspraxia | | | | | | | | | | * Profound/Complex Disabilities * Severe Learning Difficulty * Social, Emotional & Behavioural Difficulties * Speech, Language and Communication needs * Temporary Disability after Illness or accident * Visual Impairment (excluding glasses/contact lenses) * Prefer not to say * Are you a wheelchair user? | | | | | | | | | | |
| If you have ticked more than one of the above, please state which disability, learning difficulty and/or health problem impacts most on your learning | | | | | | | | | | | | | | | | |  | | | | | | | | |
| If you have a support need and would benefit from a confidential interview, please tick this box **□** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you have an EHCP/Moving on Plan: **Yes □ No □** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Are you or have you been a Looked-After Child (LAC)/Care Leaver as defined in the Children Act 1989 as one who is or has been in the care of, or provided with accommodation by, an English local authority **Yes □ No □ Prefer not to say □** | | | | | | | | | | | | | | | | | | | | | | | | | |
| Do you intend to study a full-time course at another institution at the same time as this course? **Yes □ No □** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Course Information** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Course Code** |  | | | | | | | | | | **Day** |  | | **Start Date** | |  | | **Tuition fee £** | | |  | | **No of Wks \*** | |  |
| **Course Title** |  | | | | | | | | | | **Time** |  | | **End Date** | |  | | **Assess fee £** | | |  | | **No of Hrs/Wk\*** | |  |
| **Campus/Venue/ Postcode of Study** |  | | | | | | | | | |  |  | |  | |  | | **Total to pay £** | | |  | | **GLH/**  **Year\*** | |  |
| **Course Code** |  | | | | | | | | | | **Day** |  | | **Start Date** | |  | | **Tuition fee £** | | |  | | **No of Wks \*** | |  |
| **Course Title** |  | | | | | | | | | | **Time** |  | | **End Date** | |  | | **Assess fee £** | | |  | | **No of Hrs/Wk\*** | |  |
| **Campus/Venue/ Postcode of Study** |  | | | | | | | | | |  |  | |  | |  | | **Total to pay £** | | |  | | **GLH/**  **Year\*** | |  |
| **Leading to the following Qualification Aim** **(Only for ESOL & Functional Skills) \*office use only** | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Office use only** | | | **BKSB E1** | | | | **BKSB E2** | | **BKSB E3** | | | | **BKSB L1** | | **BKSB L2** | | | | **Start Date** | | | **Expected End Date** | | **Total GLH** | |
| Unregulated ESOL | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| Speaking & Listening | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| Reading | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| Writing | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| Functional Skills English | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| Functional Skills Maths | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| English Unit(s) | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| Maths Unit(s) | | |  | | | |  | |  | | | |  | |  | | | |  | | |  | |  | |
| **Course fees and payment -** You may be eligible for a fee reduction (fee reduction is not available for Level 3+ and full cost courses indicated by a **‘SC’ or ‘HC’** code). | | | | | | | | | | | | | | | | | | | | | | | | | |
| By enrolling on this course to qualify for fee reduction, I will be: | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Aged under 19. * Aged 19+ on 31/8/18, have not reached GCSE grade C/4 or above and enrolling on a GCSE English/maths course to do so. * Aged 19-23 on 31/8/18 studying Entry/Level 1 course in order to meet the entry criteria to enrol on a Level 2 course which would result in achieving my first full Level 2 qualification prior to the age of 24. * Aged 19-23 on 31/8/18 studying my first full Level 2 funded qualification. * Aged 19-23 on 31/8/18, studying my first full Level 3 qualification. | | | | | | | | | | | | | | | | | | | | | | | | | |
| * Aged 19+ on 31/8/18, studying an Entry, Level 1 or Level 2 qualification and in receipt of Jobseekers Allowance (JSA) – income/contribution based-**evidence will be required.** * Aged 19+ on 31/8/18 studying an Entry, Lev 1 or Lev 2 qual & in receipt of Employment Support Allowance (ESA) income related/ESA WRAG- **evidence will be required.** * Aged 19+ on 31/8/18, studying an Entry, Level 1 or Level 2 qualification, earning less than £338/month (individual) or £541/month (household) and in receipt of a relevant state benefit/Universal Credit-**evidence will be required.** * Aged 19+ on 31/8/18, studying an Entry, Level 1 or Level 2 qualification and earning less that £15,736.50/per annum - **evidence will be required.** | | | | | | | | | | | | | | | | | | | | **Evidence seen**  **Staff Signature:**  **Date**:  **Student to sign to indicate unemployed status/low income status or earning under £338/month:**  **Student Signature:** | | | | | |
| * Paying in full – please make cheques payable to Havant & South Downs College * Applying for a 19+ Advanced Learning Loan [www.gov.uk/advanced-learner-loan](http://www.gov.uk/advanced-learner-loan) - Only available for Level 3+ FE courses. The loan needs to be approved by the start date of the course, if this is not the case a 10% deposit will be required. * Taking out a college instalment Plan if tuition fee is over £600.00. * Applying for a HE Tuition Fee Loan – Only available for Higher Education courses [www.gov.uk/studentfinance](http://www.gov.uk/studentfinance) * Receiving Employer Assistance - I have attached an official order/authorisation from my employer and request that you invoice my employer – please complete details below | | | | | | | | | | | | | | | | | | | | | | | | | |
| Company name | | | | | | | | | | | | | Contact name | | | | | | | | | | | | |
| Telephone number | | | | | | | | | | | | | Email | | | | | | | | | | | | |
| **Please tick which of the following statements apply - please tick all that apply, if no option is indicated the starred \* option will be selected** | | | | | | | | | | | | | | | | | | | | | | | | | |
| * No household member is in employment and the household includes one or more dependent children. * No household member is in employment and the household does not include any dependent children. * I live in a single adult household with dependent children. * None of these statements apply. * \* I confirm that I wish to withhold this information. | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Employment Information -** The government requires the college to collect information about students’ employment status to monitor the effect of learning programmes on employment. I**f no option is indicated the starred \* option will be selected** | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. On the first day of this course, what is your employment status? (please tick one) | | | | | | | | | | 1. If you are unemployed, how long have you been unemployed (please tick one) | | | | | | | | | | 1. If unemployed, please tick one of the following | | | | | |
|  | | 0 – 10 hours | | 11 – 20 hours | | 21 – 30 hours | | 31+  hours | |
| * \* Less than 6 months * 6-11 months * 12-23 months * 24-35 months * 36 months or over | | | | | | | | | | * In receipt of JSA * In receipt of ESA * In receipt of Universal Credit * Not in receipt of other State Benefit | | | | | |
| Paid employment  Self employed | | □  □ | | □  □ | | □  □ | | □  □ | |
| * Not in paid employment & looking for work * Not in paid employment & not looking for work * In full-time education or training prior to enrolment | | | | | | | | | |

|  |  |  |
| --- | --- | --- |
| **Student finance declaration** | | |
| * I understand that if I leave my course early, if I have taken out an Advanced Learner Loan, a Higher Education Loan or an Instalment Plan, I will still be liable to pay the full fee for the course immediately. * If your benefit status changes prior to the start of the course please notify Havant & South Downs College Finance Department. * Students are entitled to fee reductions in accordance with policy/criteria as shown on the College website, and as required by the Skills Funding Agency in its agreement with the College. Current proof of benefit must be produced at the time of booking or supplied within five working days of booking. If the proof of benefit is not supplied within that time, the booking will be cancelled. Please be aware that you may be asked to produce such proof again when the course commences. * I agree to pay all tuition, exam and course related fees as necessary. | | |
| Student Signature | Date |

|  |
| --- |
| **Privacy Statement – how we use your personal information** |
| 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 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.  You can agree to be contacted for other purposes by ticking any of the following boxes:   * About courses or learning opportunities. 🞏 By post. * For surveys and research. 🞏 By phone   🞏 By Email  I agree to visual images being used for marketing purposes. 🞏 Yes 🞏 No  If HSDC have qualification or centre approval withdrawn by any awarding organisation, we will support you in finding a local provider with who you can complete your studies.  Further information about use of and access to your personal data, details of organisations with whom we regularly share data, information about how long we retain your data, and how to change your consent to being contacted, please visit:  <https://www.gov.uk/government/publications/esfa-privacy-notice> |

This is an agreement between you and the Havant & South Downs College, please read it carefully. To try and save paper we do not automatically give you a copy. Should you require a copy, please tick this box. 🞏

|  |  |
| --- | --- |
| **Agreement/Signature**  I agree that initial assessment and guidance concerning the course has been provided, this included information about the course, its entry requirements, the implications of the choice of course, its suitability and the support which is available to students. I agree that I have read this document and the information given on this application is correct to the best of my knowledge. I agree that this information can be used to process my data for any purposes connected with my studies or my health and safety whilst on the premises or for any other contractual requirements and in particular to the disclosure of all the data on this form or otherwise collected about me to the ESFA for the purposes noted above in the Privacy Statement. | |
| Student Signature | Date |

**Once completed please return the form to:**

The Admissions Team, South Downs Campus, College Road, Waterlooville, PO7 8AA

|  |  |
| --- | --- |
| **College use only:** Interviewer: | Date: |
| Accepted: Yes □ No □ | |
| **For current full-time student approval**  Tutor Name: Tutor Signature: Date: | |

