



PART TIME ENROLMENT FORM 2009/10

Welcome to Waltham Forest College. Please complete all sections of this enrolment form in **BLOCK CAPITALS** as missing information may slow down the enrolment process. When you enrol, you should bring with you any examination results or certificates that apply to your enrolment, as well as proof of any benefits you currently receive (which may reduce the cost of your course).

The College offers a comprehensive advice and guidance service to learners. If you are unsure about how your course meets your career plans, or if you would like to speak with a careers advisor, please tick here and we will contact you. Alternatively, please contact the College's Admissions Team on 020 8501 8501.

Waltham Forest College has a genuine commitment to Equal Opportunities and is dedicated to ensuring that learners with disabilities or specific learning difficulties are treated fairly. Whenever possible the College will adjust provision to ensure that learners are not substantially disadvantaged. In order to support the College's equal opportunities policies, please make sure you answer all sections of this form. If you require further information about support available to learners with disabilities or learning difficulties, please contact the College's Inclusion Team on 020 8501 8050.

Name of course	Day (if known)	Time (if known)
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Title <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms	Surname/Family name
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	First name(s)

National Insurance Number	Date of Birth DD/MM/YYYY	Age on 31/08/09
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Emergency Contact	Emergency Number
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Permanent Address	Home Tel Number
	Mobile Tel Number
	Email Address
Postcode	Council/Local Authority

Country of Birth	Usual Country of Residence
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Please note that you may be required to provide further evidence regarding your nationality and/or residency status. If you were born outside of the European Economic Area (EEA) please tell us the date you arrived in the EEA (Great Britain is part of the EEA)	Day	Month	Year
	D D	M M	Y Y Y Y

On what basis are you staying in the UK? Indefinite leave to remain Limited leave to remain Refugee
 Asylum seeker, awaiting Home Office decision for years months Student Visa/Visitor's Visa Work Permit
 Granted discretionary leave to remain/humanitarian protection or exceptional leave to enter or remain

Are there any restrictions or limitations on your stay in the UK? Yes No If yes, please specify below:

The College has a genuine commitment to equal opportunities. To see if our policies are working, please tell us:

How would you describe your ethnic origin?

- | | | |
|---|--|--|
| 11. <input type="checkbox"/> Asian – Bangladeshi | 16. <input type="checkbox"/> Black – Caribbean | 21. <input type="checkbox"/> Mixed – White and Black Caribbean |
| 12. <input type="checkbox"/> Asian – Indian | 17. <input type="checkbox"/> Black – Other Background | 22. <input type="checkbox"/> Mixed – Other background |
| 13. <input type="checkbox"/> Asian – Pakistani | 18. <input type="checkbox"/> Chinese | 23. <input type="checkbox"/> White – British |
| 14. <input type="checkbox"/> Asian – Other background | 19. <input type="checkbox"/> Mixed – White and Asian | 24. <input type="checkbox"/> White – Irish |
| 15. <input type="checkbox"/> Black – African | 20. <input type="checkbox"/> Mixed – White and Black African | 25. <input type="checkbox"/> White – Other background |
| 98. <input type="checkbox"/> Any other background, please specify | | |

If you are a person with a disability, specific learning difficulty or specific health problem, please ensure that we know what you need so that we can make all reasonable adjustments to help you succeed.

Do you consider yourself to have a disability, specific learning difficulty or specific health problem? (e.g. mobility problems, mental health difficulties, dyslexia)

Yes No If yes, please specify below. We will follow this up and attempt to meet your needs where possible.

How did you learn about your course/Waltham Forest College?

- | | | | |
|---|---|--|--|
| 01. <input type="checkbox"/> School | 02. <input type="checkbox"/> College Website | 03. <input type="checkbox"/> Other Website | 04. <input type="checkbox"/> Course search e.g. HotCourses |
| 05. <input type="checkbox"/> Job Centre | 06. <input type="checkbox"/> College Visit | 07. <input type="checkbox"/> Careers Event | 08. <input type="checkbox"/> Careers Advisor |
| 09. <input type="checkbox"/> Library | 10. <input type="checkbox"/> College Prospectus | 11. <input type="checkbox"/> College Leaflet | 12. <input type="checkbox"/> Employer |
| 13. <input type="checkbox"/> Newspaper | 14. <input type="checkbox"/> Friend/Relative | 15. <input type="checkbox"/> Open Day Event | 16. <input type="checkbox"/> LiveWire (schools newsletter) |
| 17. <input type="checkbox"/> Posters at Walthamstow Central Station | | | |

Other, please specify

Which of the following qualifications have you already achieved?

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> 01 GNVQ Foundation/NVQ 1 | <input type="checkbox"/> 01 1-4 GCSE grades A-C | <input type="checkbox"/> 01 1 AS Level | <input type="checkbox"/> 01 First Certificate |
| <input type="checkbox"/> 02 5 GCSE grades A - C or more | <input type="checkbox"/> 02 2 or 3 AS Levels | <input type="checkbox"/> 02 1 A Level | <input type="checkbox"/> 02 First Diploma |
| <input type="checkbox"/> 02 GNVQ Intermediate | <input type="checkbox"/> 02 NVQ 2 | <input type="checkbox"/> 03 2 or more A Levels | <input type="checkbox"/> 03 Access to HE diploma |
| <input type="checkbox"/> 03 National Certificate | <input type="checkbox"/> 03 National Diploma | <input type="checkbox"/> 03 NVQ 3 | <input type="checkbox"/> 03 GNVQ Advanced/AVCE |
| <input type="checkbox"/> 03 4 or more AS Levels | <input type="checkbox"/> 04 HNC/HND | <input type="checkbox"/> 04 NVQ 4 | <input type="checkbox"/> 04 First Degree |
| <input type="checkbox"/> 04 PGCE | <input type="checkbox"/> 05 Higher Degree | <input type="checkbox"/> 05 NVQ 5 | <input type="checkbox"/> 05 Other Professional Qualification |
| <input type="checkbox"/> 07 Other Entry Level Qualification | <input type="checkbox"/> 09 Adult Literacy/Numeracy | <input type="checkbox"/> 09 Entry Level ESOL | <input type="checkbox"/> 99 No qualifications |

Other, please specify

From time to time learners are approached to take part in surveys, by mail and phone, which are aimed at enabling the Learning and Skills Council (LSC—see page 3 for more details) and its partners to monitor performance, improve quality and plan future provision. Tick this box if you do not wish to be contacted by the LSC or its partners in respect of surveys and research. The LSC values your views 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 about other courses or learning opportunities relevant to you. Please tick here if you do not wish to be contacted about courses or learning opportunities by post.

Please tell us about your current employment status by completing ONE section A-E below

A

If you are in paid employment, how are you employed? (Please select one response from each of the two sections)

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> 01 Full Time (L36 =) | <input type="checkbox"/> 97 Part Time (L36 =) | <input type="checkbox"/> 01 Normal Employment (A66 =) | <input type="checkbox"/> 03 Self Employed (A66 =) |
|--|--|--|--|

Employer Name			
Employer Address			
	Postcode		
Employer Contact Name/Position	Contact Tel Number		

If different from your main company address, please give us the address where you usually work?

Address			
	Postcode		

Please note: If you are being sponsored by your employer or organisation/local authority you will need to provide a letter from your employer, on headed paper, to confirm your sponsorship.

For office use only: L36= , L37=01, A66= , A67=99

EDRS identifier:

OR

B

If you are currently at school/college or have recently left school/full time education, and not in employment, tick here

For office use only: L36=07, L37=02, A66=04, A67=01

OR

C

If you are aged 14-19 and not in any form of education, employment or training, for how long?

- 01** Less than 6 months
- 02** 6-11 months
- 03** 12-23 months
- 04** 24-35 months
- 05** 36 or more months

For office use only: L36=07, L37=02, A66=07, A67=

OR

D

If all of the following 5 statements apply to you, tick here

- Not in full time education
- Not actively seeking work
- You are aged between 16 and 65
- Not in paid employment
- Not self-employed or registered unemployed

For office use only: L36=07, L37=02, A66=06, A67=99

OR

E

If you are currently registered unemployed (including pensioners), for how long? (A67)

- 01** Less than 6 months
- 02** 6-11 months
- 03** 12-23 months
- 04** 24-35 months
- 05** 36 or more months

Please indicate if you have recently been part of the following projects: (L36)

- 04** New Deal Gateway
- 06** Apprenticeships
- 03** On the caseload of a personal advisor
- 07** Not in any education and/or training

For office use only: L36= , L37=02, A66=04, A67=

Data Protection Act (1998) for 2009/10

Data Protection Act 1998 – The information you provide will be passed to the Learning and Skills Council (the LSC). The LSC is responsible for funding, planning and encouraging 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 Children, Schools and Families, the Department for Innovation, Universities 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 (which may apply to your enrolment), helping develop employment by promoting employability, business spirit and equal opportunities, and investing in human resources. Further information about partner organisations and the LSC, and what they do, may be found at www.lsc.gov.uk/providers/Data/help/ and by following the links to data protection. At no time will your personal information be passed to organisations for marketing or sales purposes.

Learner Declaration (to be completed by all learners)

I confirm that the information provided is complete and correct. Under the provisions of the Data Protection Act I agree to the College processing the personal data contained in this form for any purpose connected with my studies or my health and safety, whilst on the premises, for any legitimate reason. I understand that my study may be part financed by the European Social Fund. I agree to abide by the rules of the College.

Signature (learner) **Date**

Parent/Guardian Signature (for learners aged under 18) **Date**

Office Use Only	Mon	Tue	Wed	Thu	Fri
AM					
PM					
Eve					

Term Dates 2009/10	
Autumn Term:	Mon 07 September - Fri 18 December 2009 Half Term 26-30 October 2009
Spring Term:	Mon 04 January - Fri 26 March 2010 Half Term 15-19 February 2010
Summer Term:	Mon 12 April - Fri 02 July 2010 Half Term 31 May - 04 June 2010

For office use only

Sent to:	Acknowledgement letter sent:	Acceptance letter sent:
Concessions: <input type="checkbox"/> Yes <input type="checkbox"/> No	Concession Evidence: Type: _____ Seen by: _____	

AFFIX COURSE LABEL 1 HERE
ENSURING THAT THE COURSE TITLE AND LECTURER'S SIGNATURE ARE BOTH VISIBLE

AFFIX COURSE LABEL 2 HERE
ENSURING THAT THE COURSE TITLE AND LECTURER'S SIGNATURE ARE BOTH VISIBLE

Start Date		End Date	
Hrs/wk		No wks	GLH
Lecturer			

Start Date		End Date	
Hrs/wk		No wks	GLH
Lecturer			

AFFIX COURSE LABEL 3 HERE
ENSURING THAT THE COURSE TITLE AND LECTURER'S SIGNATURE ARE BOTH VISIBLE

FOR LEARNER BARCODE
(NOT COURSE LABEL)

Start Date		End Date	
Hrs/wk		No wks	GLH
Lecturer			

Learner ULN

Fees	Course 1	Course 2	Course 3
Tuition			
Enrolment			
Consumables			
Exam			
Centre Fee			
VAT			
TOTAL			

Tuition fee paid:

01 Direct from employer
 02 Learner recovering fee from employer
 03 Learner

03 Other source _____
 98 No tuition fee - non payment reason _____

Fee Receipt

Please note that you have not completed the College's enrolment process until you have obtained your ID card. You must carry this receipt at all times when you are on College premises until you have received your ID card. Please notify Student Services if you lose your ID card. A charge to cover the administrative costs will be made for its replacement.

The College reserves the right to refuse entry to a class or examination if your performance on your course is unsatisfactory and/or all fees have not been paid.

FOR LEARNER BARCODE
(NOT COURSE LABEL)