

# Part-Time Enrolment Form and Learner Agreement 2009/2010

## How do I Complete This Form?

Please read the "How to Enrol" section in this course prospectus. Complete all sections of this form in BLOCK CAPITALS and sign where required. If you need help completing this form, please contact the Hub Office on 01993 703464 or 01235 555585 where someone will be happy to help you.

## Personal Details

We cannot proceed with your enrolment unless ALL parts of this section are completed. (BLOCK CAPITALS). Please note that it will be the details you supply below that will appear on any certificates that you may receive on completion of your course. Please remember to sign the back of this form so we can process your information.

**Surname/Family Name**

**First name(s)**

**Title**  Mr  Mrs  Miss  Ms  **Other Title**

**Date of Birth**

## Course Details

Course Code	Course Title	Course Venue	Start Date	End Date	No of Weeks	Total Hours Per Week	Total Number Of Hours	Fee
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	£ <input type="text"/>

FOR OFFICE USE ONLY

**Email** (Please print clearly)

**Address**

  
  


**Postcode**

**Telephone Day\***

**Telephone Evening**

**Mobile Number**

**ULN (if known)**

**Please tick your current employment status:**

Employed  Self Employed  Unemployed  In full-time education or training

\* We may need to contact you if your course details are in any way amended.

## Ethnicity, Equality & Diversity

It would help our monitoring if you would tick one of these boxes. The information is confidential and helps the college and the government to provide education and training for all groups in the community.

- |   |  |
|---|--|
| <input type="checkbox"/> Asian or Asian British – Bangladeshi | <input type="checkbox"/> White (British)             |
| <input type="checkbox"/> Asian or Asian British – Indian      | <input type="checkbox"/> White (Irish)               |
| <input type="checkbox"/> Asian or Asian British – Pakistani   | <input type="checkbox"/> White (Other)               |
| <input type="checkbox"/> Asian or Asian British – Other       | <input type="checkbox"/> Mixed White/Black African   |
| <input type="checkbox"/> Black or Black British – African     | <input type="checkbox"/> Mixed White/Black Caribbean |
| <input type="checkbox"/> Black or Black British – Caribbean   | <input type="checkbox"/> Mixed White/Asian           |
| <input type="checkbox"/> Black or Black British – Other       | <input type="checkbox"/> Mixed Other                 |
| <input type="checkbox"/> Chinese                              | <input type="checkbox"/> Other                       |
| <input type="checkbox"/> Other                                |  |

Please complete this section:

What is your Nationality?

- British  Other (please state)

Have you lived in the United Kingdom/EU for 3 or more consecutive years prior to this enrolment?

- Yes  No

If no, please state your country(ies) of residence for the last 3 years

Please note that you may be asked to complete a questionnaire to ascertain your status.

## Disabilities

Do you have a disability or medical condition that the college should know about?  Yes  No

We need this information in case of evacuation or medical emergency.

- |   |  |
|---|--|
| <input type="checkbox"/> Hearing impairment   | <input type="checkbox"/> Mental ill health             |
| <input type="checkbox"/> Emotional/behavioural difficulties                             | <input type="checkbox"/> Visual impairment             |
| <input type="checkbox"/> Disability affecting mobility                                  | <input type="checkbox"/> Profound/complex disabilities |
| <input type="checkbox"/> Temporary disability after illness or accident                 |  |
| <input type="checkbox"/> Other physical disability                                      |  |
| <input type="checkbox"/> Asperges Syndrome  |  |
| <input type="checkbox"/> Other medical condition (e.g. asthma, epilepsy – please state) |  |

Will you need specialist support to help you study at the College?

- Yes  No

If yes, please specify

## Specific Learning Difficulties

Do you have any specific learning difficulties that the College could offer you support in? e.g. dyslexia, dyspraxia etc

- Yes  No

If yes, please specify

Do you need extra help in Maths and/or English to help you succeed on this course?

- Yes  No

If yes, please specify

## Prior Education

Please tick your highest qualification level prior to starting this course. (The qualifications in brackets are examples of qualifications at the level shown)

- LEVEL 0 (Word Power or Number Power or equivalent)
- LEVEL 1 (GCSE D–G or CSE below grade 1 or equivalent)
- LEVEL 2 (GCSE A–C or 2/3 AS Levels or equivalent)
- LEVEL 3 (4+ AS Levels or equivalent)
- LEVEL 4 (First degree or equivalent)
- LEVEL 5 (Higher degree or equivalent)

## How Did You Hear About Abingdon and Witney College?

- Prospectus delivered to me at home
- Recommendation from a friend
- Previous Student
- Advertisement in the newspaper/radio
- Website
- Through a work colleague
- Library/Community Centre
- Employer
- Via Email
- Local Knowledge
- Other (please state)

At Abingdon and Witney College, we want to contact you in a way which you prefer. Please tick which methods we can contact you on:

- Email  Mobile Phone  Text Message  Home Phone  Post

## Why Do We Need So Much Information?

### Data Protection Act 1998 and Fair Processing Notice

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; diploma consortiums; 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/National/Partners/Data/Help/](http://www.lsc.gov.uk/National/Partners/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. 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 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.
- Please tick here if you do not wish to be contacted about courses or learning opportunities by post. The LSC or its partners may wish to contact you from time to time about courses, or learning opportunities relevant to you.

**FOR OFFICE USE ONLY**

Course Code				
Tuition				
Materials Fee				
Exam Fee				
Remissions	-	-	-	-
Balance To Pay	£ □□□□	£ □□□□	£ □□□□	£ □□□□
OVERALL TOTAL	£ □□□□			

PLEASE LEAVE THIS SPACE BLANK

**Employer Responsive**

If your fees are being paid by an employer or sponsor or if you are self-employed and are paying your own fees, please complete the following details.

If your course has no fee (e.g. Train to Gain) and you are being supported by your employer to attend the course, please complete the following details.

**INVOICE:** If you would like the College to invoice your employer for the cost of your course you **MUST** attach a letter from your employer confirming that they are willing to pay your fees. Please note that your employer details will be held on a contact database for marketing purposes as part of the College's Action for Business service.

If you do not wish your employer details to be held on a marketing database, please tick this box

**About You**

It is vital that we have your National Insurance Number

Employer Contact Name

Position

Organisation Name

Organisation Address

## Payment Details

- Cash (Please enrol in person)  
 Cheque (Please make cheques payable to Abingdon and Witney College)  
 Credit/Debit Card (Please complete your card details below)  
 Employer invoice (Please attach a letter from your employer)

Please note that to ensure card security the following information will be blacked out from your enrolment form once payment has been taken.

Issue Number       Start Date       Expiry Date

Security Number (last 3 digits on your signature strip)

Card Number

If you are claiming fee remission, please tick the appropriate box below, YOU MUST show evidence at enrolment. A fee may still apply to your course, please ask at enrolment: Conditions apply to all fee remission types.

Please refer to the 'How to Enrol' section for further information.

- Job seeker's Allowance  
 Working Tax Credit  
 Housing Benefit  
 Under 19 and over 16 on 31st August 2009  
 Income Support  
 Pensions Credit (Guarantee Credit)  
 Level 2 Entitlement  
 Level 3 Entitlement

Documents seen (description)	Signed (enrolling officer) OFFICE USE ONLY	Date
		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## DECLARATION

I have completed this form correctly and to the best of my knowledge. I agree to Abingdon and Witney College processing personal data contained within this form and other data collected while I am a student. I agree to the processing of such data for any purposes connected with my studies, Health and Safety or any other legitimate reason. I have been given access to the information and/or guidance referred to below. I accept that I will be liable for debt collection if I am late paying any fees due. I have read and understood the "How to Enrol" section of the prospectus.

Signed

Date

# This Student Learner Agreement tells you what you have the right to expect from Abingdon and Witney College

**It is important to us that you feel that the following requirements have been met:**

- You understand any qualification etc. that your course of study can lead to.
- You are aware of the possibility of alternative courses to the one(s) you have chosen.
- You have had the chance to discover if you are likely to be able to cope with the course(s).
- You have an idea of the amount of work needed to complete the course(s) successfully.
- If your course offers any exemptions because of qualifications you already have, you know about these.
- You know about any educational, practical or financial support that may be available to you.

If further information on any of these points is required, please refer to the prospectus for contact numbers and information.

**Thank you for completing this form.  
Please return it together with your payment to Abingdon and Witney College.**

You will receive confirmation of your place on the course shortly.

You may post the form to one of the following addresses:

The Hub Office (Abingdon Campus), Abingdon and Witney College, FREEPOST (OF1653), Abingdon, Oxon, OX14 1BR

or The Hub Office (Witney Campus), Abingdon and Witney College, FREEPOST (SCE13942), Witney, OX28 6BR

or The Short Course Administrator, Advanced Business Solutions, FREEPOST (OF1653), 5g Milton Park, Abingdon, OX14 4RR

(Please note that the freepost addresses are the equivalent of a 2nd class postal service)

## Thank you for enrolling with Abingdon and Witney College.

**We hope you enjoy your course.**

All information on this form is correct at time of going to press

FOR OFFICE USE ONLY		
Enrolling Tutor's Signature (for courses requiring an interview)		□□□□□□□□
Admissions staff Signature (form checked for accuracy and data input)		□□□□□□□□
Person Code		