

# 2023/24 Adult Education Enrolment Form

(PLEASE COMPLETE ALL SECTIONS USING BLOCK CAPITALS)

## SECTION 1 – YOUR PERSONAL DETAILS

Have you been a student at St Vincent College before?

Yes

☐

No

☐

Please enter your name as it appears on official documents:

 Title: Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other  Gender: Male ☐ Female ☐

 Forename(s) (first/given names): 

 Middle Name(s):  Preferred Name: 

 Surname (family name):  Preferred Pronoun: 

 Date of Birth (DD/MM/YYYY):  Previous Surname: 

 National Insurance Number:  Age (at start date of course) 

How would you describe your Ethnic origin? (Please tick)

### White

 31 ☐ English / Welsh / Scottish / Northern Irish / British

 32 ☐ Irish

 33 ☐ Gypsy or Irish Traveller

 34 ☐ Any Other White Background

### Mixed / Multiple ethnic group

 35 ☐ White and Black Caribbean

 36 ☐ White and Black African

 37 ☐ White and Asian

 38 ☐ Any Other Mixed I multiple ethnic background

### Asian/Asian British

 39 ☐ Indian

 40 ☐ Pakistani

 41 ☐ Bangladeshi

 42 ☐ Chinese

 43 ☐ Any other Asian background

### Black British

 44 ☐ African

 45 ☐ Caribbean

 46 ☐ Any other Black / African/ Caribbean background

### Other

 47 ☐ Arab

 98 ☐ Any other ethnic group

## SECTION 2 – YOUR CONTACT DETAILS

Current Address:

Postcode: Number of years at this address:

 Home Tel.  Other Tel. Number: 

 Number:  Personal Email: 

## SECTION 3 – EMERGENCY CONTACT / NEXT OF KIN

PERSON TO CONTACT IN AN EMERGENCY:

 Contact Name:  Tel. Number: 

 Relationship to you:  Lives with Contact? ☐

## SECTION 4 – CRIMINAL CONVICTIONS

 Do you have any unspent criminal convictions? ☐ Yes ☐ No

Any information you give will be completely confidential and will be considered only in relation to this enrolment. An unspent criminal conviction does not necessarily prevent you from enrolling.

## SECTION 5 – COURSES

Course Code	Course Title	Start Date	Day	Time	Level	Course Fee

## SECTION 6 – ADDITIONAL SUPPORT

The College has a wide range of additional support. (We welcome students with disabilities, learning difficulties and health problems.) Please tick the boxes that are appropriate to you. This will enable the College to consider your additional support needs whilst on a course with us.

If more than one disability, learning difficulty or health problem applies then please circle your main disability, learning difficulty or health problem

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> None   | <input type="checkbox"/> Other physical disability (93)      | <input type="checkbox"/> Autistic Spectrum Disorder (14)                                       |
| <input type="checkbox"/> Visual impairment (04)   | <input type="checkbox"/> Mental Health difficulty (09)       | <input type="checkbox"/> Aspergers Syndrome (15)   |
| <input type="checkbox"/> Hearing impairment (05)  | <input type="checkbox"/> Moderate learning difficulty (10)   | <input type="checkbox"/> Temporary disability after illness (e.g. post-viral) or accident (16) |
| <input type="checkbox"/> Disability affecting mobility (06)   | <input type="checkbox"/> Severe learning difficulty (11)     | <input type="checkbox"/> Speech, language & communication needs (17)                           |
| <input type="checkbox"/> Profound complex disabilities (07)   | <input type="checkbox"/> Dyslexia (12)                       | <input type="checkbox"/> Other disability (97)   |
| <input type="checkbox"/> Social and emotional difficulties (08)   | <input type="checkbox"/> Dyscalculia (13)                    | <input type="checkbox"/> Prefer not to say (98)  |
| <input type="checkbox"/> Other medical condition (e.g. Epilepsy, Asthma, Diabetes. Please state below (95)) | <input type="checkbox"/> Other specific learning difficulty  |  |
|   | <input type="checkbox"/> (94) Other learning difficulty (96) |  |

Please provide any further comments:

Would you like someone to contact you about extra support? Do ☐ Yes ☐ No Do you have an Education Health Care Plan (EHCP)? ☐  
 you require a Personal Emergency Evacuation Plan (PEEP)? ☐ Yes ☐ No If escorted on the course, please give details:  
 Escort Name: Escort Telephone: ID sighted: Date:

## SECTION 7 – RESIDENCY

What is your nationality? :

Have you lived in the UK/EU for more than 3 years?

☐ Yes ☐ No

Are there any immigration restrictions on how long you can stay in the UK?

☐ Yes ☐ No

Are you an asylum seeker?

☐ Yes ☐ No

What type of Visa do you hold?

Dependant/Spouse Visa ☐ Holiday Visa ☐ Student Visa ☐ Work Visa ☐ Indefinite leave to remain ☐

If you have lived in the UK/EU for less than 3 years then please enter the country you have previously lived in:

Office use only

If YES to any of these questions then please refer to student Services

Date of Arrival in UK

Visa Expiry Date

## SECTION 8 – PREVIOUS EDUCATION AND QUALIFICATIONS

What was the last educational institution you attended?

What year did you leave?

What are your grades for the following GCSE subjects?

GCSE English Language:

GCSE English Literature:

GCSE Mathematics:

What is your highest level of qualification (in any subject)? (tick the first box that applies to you)

Level	Qualifications	Tick
Level 7+	Masters Degrees, Postgraduate Certificates and Diplomas, Doctorates, Award, Certificate, Diploma Level 7+	<input type="checkbox"/>
Level 6	Bachelor's Degrees, Graduate Certificates and Diplomas, Award, Certificate, Diploma Level 6	<input type="checkbox"/>
Level 5	HND, Foundation Degree, Award, Certificate, Diploma	<input type="checkbox"/>
Level 4	NVQ Level 4, HNC, Award, Certificate, Diploma Level 4	<input type="checkbox"/>
Full Level 3	NVQ Level 3, 2 or more A Levels, 4 or more AS Levels, Certificate, Diploma Level 3, Access to HE	<input type="checkbox"/>
Full Level 2	NVQ Level 2, 5 or more GCSE/O Levels at A*-C OR 4-9, 2 or 3 AS Levels, 1 A Level, Cert/Diploma Level 2	<input type="checkbox"/>
Level 1	NVQ Level 1, GCSE/O-Level Grades D-G or fewer than 5 A*-C, 1 AS Level, Award/Cert/Diploma at Level 1, Functional Skills at Level 1, Certificate in Adult Literacy, Numeracy, ESOL at Level 1	<input type="checkbox"/>
Entry	Award/Cert at Entry Level, Certificate in Adult Literacy, Numeracy, ESOL at Entry Level, Functional Skills	<input type="checkbox"/>
None	No Qualifications	<input type="checkbox"/>

## SECTION 9 – EQUAL OPPORTUNITIES

OPTIONAL - These questions are optional and are answered at your discretion. You have the right to keep this information confidential.

### Sexual Orientation

- ☐ Bisexual  
☐ Gay/lesbian  
☐ Heterosexual  
☐ Other  
☐ Prefer not to say

### Religion/Belief

- ☐ Christian  
☐ Hindu  
☐ Catholic  
☐ Sikh  
☐ Buddhist

- ☐ Muslim  
☐ Jewish  
☐ None  
☐ Prefer not to say

☐ Other (please state)

### Gender

What gender do you currently identify yourself as:

☐ Prefer not to say

## SECTION 10 – EMPLOYMENT STATUS

If you are working please tick one option from each

column: A:

- ☐ I am Self Employed
- ☐ I work for an Employer
- ☐ I am an Apprentice

B:

- ☐ I work for 0 to 10 hours each week
- ☐ I work for 11 to 20 hours each week
- ☐ I work for 21 to 30 hours each week
- ☐ I work for 31 hours or more each week

C:

- ☐ I have been working for my current employer for less than 3 months
- ☐ I have been working for my current employer for 4-6 months
- ☐ I have been working for my current employer for 7-12 months
- ☐ I have been working for my current employer for over 12 months

If you are not working, please tick the statement that best describes you:

- ☐ I am not employed and not looking for work (tick this option if you are in full time education)
- ☐ I am not employed and have been looking for work for less than 6 months
- ☐ I am not employed and have been looking for work for 6-11 months
- ☐ I am not employed and have been looking for work for 12-23 months
- ☐ I am not employed and have been looking for work for 24-35 months
- ☐ I am not employed and have been looking for work for more than 36 months

If you are applying for a work based learning course please provide;

Employer/Placement name:

Address:

Contact name in placement and telephone number:

## SECTION 11 – REFERENCES (Vocational learning area (Work Based Learning) courses only)

If applying for any work based learning courses please provide two referees - they should preferably be an employer or a professional person (no friends or relatives).

First referee name:	Second referee name:	Experience: Please give details of any relevant experience (or attach a copy of your CV).
Address:	Address:	
Occupation:	Occupation:	

## SECTION 12 – FEE INFORMATION

Please tick which fee waiver you are entitled to or how the course you are applying for will be funded

			Evidence seen
<b>Full Time 16-18</b>	There are no tuition or exam fees for full time learners aged 16-18 on 31st August 2018 enrolling on a Further Education Course	<input type="checkbox"/>	<input type="checkbox"/>
<b>Unemployed</b>	Your tuition and exam fees may be waived on eligible Level 2 or lower courses if you are unemployed and in receipt of an eligible D state benefit (e.g. Universal Credit, JSA or Employment Support Allowance, Income Support, Housing/Council Tax, Partner of Working Tax Credit Claimant, Pension Guarantee Credit, Disability Living Allowance, Personal Independence Payment). You will also need to be seeking employment and need skills training to help you find employment. Please Provide Evidence with this application.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Low Income</b>	Your tuition and exam fees may be waived on eligible Level 2 or lower courses if you are employed and earning less than £20,319.00 annual gross salary. Wage slip or current employment contract dated within 3 months of course start date is required.	<input type="checkbox"/>	<input type="checkbox"/>
<b>First Level 2</b>	If you are aged 19-23 at the start of your course and studying an eligible full Level 2 qualification or lower (excludes ESOL) then you may be entitled to have your fees waived. You must not already hold a full Level 2 qualification or above. I confirm that this is my first full Level 2 and declare that I do not already have a full Level 2 qualification or above.	<input type="checkbox"/>	<input type="checkbox"/>
<b>First Level 3 loans</b>	If you are aged 19-23 at the start of your course and studying an eligible full Level 3 qualification then you may be entitled to have your tuition and exam fees waived. You must not already hold a full Level 3 qualification or above. I confirm that this is my first full Level 3 and declare that I do not already have a full Level 3 qualification or above.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Loans</b>	If you have applied for an Advanced Learning Loan or Higher Education Loan from Student Finance England then you will need to bring approval of the loan when enrolling. Please see Student Services if you need assistance with your loan application.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Employer/Sponsor Pay</b>	If your fees are being paid by your employer or sponsor then you will need to supply a letter from an authorised person on company letter headed paper confirming this.	<input type="checkbox"/>	<input type="checkbox"/>
<b>Full Payment</b>	If you will be paying the full amount for your course upon enrolment. Please supply Mastercard/Visa/Debit card details: Card No: <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"/> Date Expiry: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Security Code: <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Adult Maths/English</b>	I wish to claim a fee waiver to study GCSE/Functional Skills Maths/English or other eligible basic skill qualification. I confirm that I do not have GCSE Maths/English at Grade C/4 or above.	<input type="checkbox"/>	<input type="checkbox"/>

Office use only Evidence Type :

Office use only Date:

Office use only Seen By:

## SECTION 13 – HOUSEHOLD SITUATION

Please tick the statement that best describes your household (tick all that apply):

- ☐ I live in a household where no one is employed and there are dependent children (including yourself) **HHS01** I
- ☐ live in a single adult household with dependent children (including yourself) **HHS03**
- ☐ I live in a household where no one is employed and there are no dependent children **HHS02**
- ☐ None of the above apply **HHS99**
- ☐ I do not wish to give this information **HHS98**

## SECTION 14 – PRIVACY STATEMENT

**How the Education Skills Funding Agency (ESFA) uses 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) to inform learners about the Individualised Learner Record (ILR) and how their personal information is used in the ILR. Your personal information is used by the DfE to exercise our functions under article 6(1)(e) of the UK GDPR and to meet our statutory responsibilities, including under the Apprenticeships, Skills, Children and Learning Act 2009. Our lawful basis for using your special category personal data is covered under Substantial Public Interest based in law (Article 9(2)(g)) of GDPR legislation. This processing is under Section 54 of the Further and Higher Education Act (1992).

The ILR collects data about learners and learning undertaken. Publicly funded colleges, training organisations, local authorities, and employers (FE providers) must collect and return the data to the ESFA each year under the terms of a funding agreement, contract or grant agreement. It helps ensure that public money distributed through the ESFA is being spent in line with government targets. It is also used for education, training, employment, and well-being purposes, including research.

We retain your ILR learner data for 20 years for operational purposes (e.g. to fund your learning and to publish official statistics). Your personal data is then retained in our research databases until you are aged 80 years so that it can be used for long-term research purposes. For more information about the ILR and the data collected, please see the ILR specification at <https://www.gov.uk/government/collections/individualised-learner-record-ilr>

ILR data is shared with third parties where it complies with DfE data sharing procedures and where the law allows it. The DfE and the English European Social Fund (ESF) Managing Authority (or agents acting on their behalf) may contact learners to carry out research and evaluation to inform the effectiveness of training.

• Your right to data portability - You have the right to ask that we transfer the personal information you gave us to another organisation, or to you, in certain circumstances. • You are not required to pay any charge for exercising your rights. If you make a request, we have one month to respond to you. You can **agree** to be contacted for other purposes by ticking any of the following boxes:

- ☐ About courses or learning opportunities
- ☐ For surveys and research
- ☐ By post ☐ By phone ☐ By email

For more information about how your personal data is used and your individual rights, please see the DfE Personal Information Charter (<https://www.gov.uk/government/organisations/department-for-education/about/personal-information-charter>) and the DfE Privacy Notice (<https://www.gov.uk/government/publications/privacy-notice-for-key-stage-5-and-adult-education>)

If you would like to get in touch with us or request a copy of the personal information DfE holds about you, you can contact the DfE in the following ways: Using our online contact form [https://form.education.gov.uk/service/Contact\\_the\\_Department\\_for\\_Education](https://form.education.gov.uk/service/Contact_the_Department_for_Education) By telephoning the DfE Helpline on 0370 000 2268 Or in writing to: Data Protection Officer, Department for Education (B2.28), 7 & 8 Wellington Place, Wellington Street, Leeds, LS1 4AW

If you are unhappy with how we have used your personal data, you can complain to the Information Commissioner's Office (ICO) at: Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. You can also call their helpline on 0303 123 1113 or visit <https://www.ico.org.uk>

**How St Vincent College uses your Personal Information:**

The College collects information about all our staff and students for various administrative, academic and health and safety reasons. We retain personal information (provided by you, or created by us), including: your application details, our assessment of your application and the details of any offer(s) of study we have made or as an attendee of our college. We may also keep it beyond your attendance at our college if this is necessary in order to comply with our legal obligations. I consent to St Vincent College processing personal data contained in this form, or other data the College may obtain from other sources. I agree to the processing of such data for any purposes connected with my studies or for my health and safety whilst on the premises or for any other legitimate reason, including reporting to parents in the case of students under the age of 18 years.

You can agree to be contacted by the College for other purposes (not listed above) by ticking any of the following boxes:

I agree to receiving marketing information from the College by

- ☐ Post ☐ E-Mail ☐ Phone ☐ SMS

I agree to be contacted about events and promotions from the College by

- ☐ Post ☐ E-Mail ☐ Phone ☐ SMS

I agree to photos and/or film being taken of me and used for marketing purposes

- ☐ Yes ☐ No

## SECTION 15 – LEARNER AGREEMENT

**Student Declaration:** I declare that the information given on this form is correct to the best of my knowledge. I agree that I have received adequate information, advice and guidance about my proposed programme of study including:

- Entry requirements
- The structure of the programme
- The type of learning and assessment involved
- Work Experience (if included)
- Visits and residentials that are part of the course
- Any costs involved
- Information and availability of financial assistance

I have read the Learner Agreement and understand my responsibilities as a student. I am aware of the College's policies relating to the charging and payment of fees and agree to be bound by them. I understand that if I withdraw from the above course once the course has started then I am still liable for the course fee including those from the Student Loans Company. I understand that all materials or kit costs are charged separately. I am aware that I must inform the College of any change in my circumstances affecting my eligibility for financial support. I agree to St Vincent College handling (including passing such information to authorised third parties in accordance with purposes set out above) and processing this information about me.

I understand that the information will only be used for purposes set out above and my consent is conditional upon the College complying with its duties and obligations under current Data Protection legislation.

Student Signature

Staff Signature

Date:

Date:

Staff Print Name

ID Verification for ULN (office use only):

- ☐ Passport ☐ NI Card ☐ Benefits Details
- ☐ Driving Licence ☐ Debit/Credit Card ☐ Other:



European Union  
European Social Fund

Activity may have been directly or indirectly part-financed by the European Union through European Social Fund - helping develop employment by promoting employability, business spirit and equal opportunities and investing in human resources

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