

## Concessions

(You may be entitled to a concession. You will need to show proof of benefit or an official letter from the Benefits Agency or Council, not more than one month old, to prove your current status. More information can be obtained from the College Registrar.)

Please tick (✓) a box if you are in receipt of any of the following:

- |    |  |                          |    |                           |                          |
|----|--|--------------------------|----|---------------------------|--------------------------|
| 01 | 16-18 year old learner on 31-Aug-2009                    | <input type="checkbox"/> | 21 | Working Tax Credit*       | <input type="checkbox"/> |
| 04 | Income Based State Benefit*                              | <input type="checkbox"/> | 22 | Level 2 Entitlement+      | <input type="checkbox"/> |
| 08 | Unwaged Dependent of any people on codes 04,15,21 or 23* | <input type="checkbox"/> | 23 | Pensions Guarantee Credit | <input type="checkbox"/> |
| 15 | Job Seeker's Allowance (JSA)**                           | <input type="checkbox"/> | 24 | Level 3 Entitlement++     | <input type="checkbox"/> |

\*You will need to provide a copy of your most recent award notice (not more than one month old).

\*\* Your signing-on book is not allowable proof

+ You must be aged over 19 and will need to sign a declaration that you do not already have a full level 2 qualification

++ You must be aged between 19 and 25, and will need to sign a declaration that you do not already have a full level 3 qualification

## Learning Agreement Declarations

**Data Protection Act 1998** - The information you provide on this form will be passed to the Learning and Skills Council (the LSC). The LSC is responsible for funding and planning 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 Education 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, 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 <http://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. 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:

The LSC or its partners may wish to contact you from time to time about 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:

**Do you have any previous convictions or cautions, not covered by the Rehabilitation of Offending Act? If so an interview will be arranged in accordance with the College's Ex-Offenders Policy.** YES  NO

I agree to Southgate College processing personal data contained in this form, or other data that Southgate College may obtain from me or other people while I am a student. I agree to the processing of such data for any purposes connected with my studies or my health and safety whilst on the premises or for any other legitimate reason. I have read the data protection statement on this form. I declare that I understand and agree with the following statements:

Course places	Your place on a course is only guaranteed after you have been issued with a receipt from the college.
Change of circumstances	Changes of address, telephone number, employment, and fees, concessions or childcare support status must be notified to the College Admissions Centre.
Closure of courses	The provision of any course is conditional upon there being sufficient demand. The Corporation reserves the right to close any course, or to discontinue it without notice, if the enrolment or attendance is insufficient to justify its provision. In these circumstances, fees will only be refunded for that part of a course which has not taken place. The Corporation will not accept responsibility for any other fees or expenses incurred by the student.
Transfer between courses	You may be able to transfer from one course to another only with the support of your tutor. If the fee for the new course is higher, the balance of the fee must be paid.
Refund of fees	Full/part refunds will only be made if the course is cancelled/curtailed and no suitable alternative has been offered. If a student withdraws from a course a refund will not normally be made. In all circumstances a refund of fees will be at the discretion of the College Governors.
Concession	The following documents will be accepted as evidence of concessionary status: • a photocopy of proof of benefit not more than one month old • an official letter from the Benefits Agency or Council to prove your current status
Advice and guidance	I have received guidance relating to the course(s) on which I am enrolling and agree that these courses meet my requirements at present.
College rules	The information I have given is to the best of my knowledge complete and correct. I agree to abide by the College rules as published and to pay all fees by the due dates. I further declare that I have no outstanding debt to the College.

Signature:  Date:



This activity has 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.

### Personal details

**High Street, Southgate, London N14 6BS**  
**Tel: 020 8982 5050, [admiss@southgate.ac.uk](mailto:admiss@southgate.ac.uk)**

Learner reference number

Mr/Mrs/Ms/Miss  Family Name  First Name(s)  Gender  Date of Birth

EMA Number (if you have one)  Unique Learner Number (ULN) (if you have one)

Home Address  Term-time Address (Students living away from home only)

Postcode  Tel  Postcode  Tel

Mobile  Email

Person to contact in an emergency Name  Tel

Please state your Nationality:

Have you lived in England or another European Union nation since 1 September 2006? YES  NO  If 'no', your country of residence:

If your answer is 'no' you will need to have a fee assessment interview to determine your status (as a home student or an international student). This assessment will be either by interview or production of evidence of status. The College reserves the right to charge fees at the international rate if you are assessed as an international student.

### Residency details

**Residency Details (if you were born outside the UK)**

Please give date of arrival in UK: Day  Month  Year  Previous country of residence:

Please tick one of the following reasons for entering the UK:

<b>01</b> Asylum seeker <input type="checkbox"/>	<b>02</b> Refugee <input type="checkbox"/>	<b>03</b> For permanent settlement <input type="checkbox"/>
<b>04</b> Student's visa <input type="checkbox"/>	<b>05</b> Work permit <input type="checkbox"/>	<b>06</b> Visitor's visa <input type="checkbox"/>
<b>07</b> Other (please specify): <input type="text"/>		

Are there any restrictions or limitations on your stay in the UK? (Please specify):

### Course details

Course Code <input type="text"/>	Course Code <input type="text"/>
Course Title <input type="text"/>	Course Title <input type="text"/>
Start Date <input type="text"/> Planned End Date: <input type="text"/>	Start Date <input type="text"/> Planned End Date: <input type="text"/>
Annual GLH: <input type="text"/> Week GLH: <input type="text"/>	Annual GLH: <input type="text"/> Week GLH: <input type="text"/>

### Admissions Centre Use

Tutor (print name):  Tutor (print name):

Tutor's signature:  Tutor's signature:

Status interview signature:  Date:  Amt Pd:  Inv No:

Checked by:  Date:

# Equal Opportunities

Thank you for completing this part of the form - the information supplied will be used to help us monitor our equal opportunities policy and ensure that the College will continue to meet the needs of all students.

**What is your first language?** English:  Other (please specify):

**If English is not your first language, do you need help with your English?** Yes  No

Please describe your ethnic origin - tick (✓) one box only:

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

**Do you consider yourself to have a learning difficulty or disability?** Yes  No

**If you have said yes please tick (✓) the relevant boxes below:**

The College seeks to support all learners, including those with learning difficulties and/or disabilities.

A tick will automatically offer you a support interview with a member of the learning support team to talk about your needs for the course that you want to follow.

- |   |  |   |
|---|--|---|
| <b>01</b> Visual impairment <input type="checkbox"/>            | <b>02</b> Hearing impairment <input type="checkbox"/>                                    | <b>03</b> Disability affecting mobility <input type="checkbox"/>      |
| <b>04</b> Other physical disability <input type="checkbox"/>    | <b>05</b> Other medical condition eg epilepsy, asthma, diabetes <input type="checkbox"/> | <b>06</b> Emotional/behavioural difficulties <input type="checkbox"/> |
| <b>07</b> Mental ill health <input type="checkbox"/>            | <b>08</b> Temporary disability after illness or accident <input type="checkbox"/>        | <b>09</b> Profound/complex disabilities <input type="checkbox"/>      |
| <b>10</b> Aspergers Syndrome <input type="checkbox"/>           | <b>90</b> Multiple disabilities <input type="checkbox"/>                                 | <b>97</b> Other <input type="checkbox"/>                              |
| <b>01</b> Moderate learning difficulty <input type="checkbox"/> | <b>02</b> Severe learning difficulty <input type="checkbox"/>                            | <b>10</b> Dyslexia <input type="checkbox"/>                           |
| <b>11</b> Dyscalculia <input type="checkbox"/>                  | <b>19</b> Other specific learning difficulty (please specify): <input type="text"/>      |   |
| <b>20</b> Autism spectrum disorder <input type="checkbox"/>     |  |   |

**How will you travel to the College?**

- 01** Car  **02** Bus  **03** Train/Underground  **04** On foot  **05** Bicycle
- 07** Other (please specify):

**How did you find out about the College?**

- |  |  |  |   |
|--|--|--|---|
| <b>01</b> Friend <input type="checkbox"/>                | <b>02</b> Careers <input type="checkbox"/>   | <b>03</b> Library <input type="checkbox"/>       | <b>04</b> Visit <input type="checkbox"/>            |
| <b>05</b> Newspaper <input type="checkbox"/>             | <b>06</b> At school <input type="checkbox"/> | <b>07</b> Internet <input type="checkbox"/>      | <b>08</b> Cinema <input type="checkbox"/>           |
| <b>09</b> Floodlight/Hotcourses <input type="checkbox"/> | <b>10</b> Agent <input type="checkbox"/>     | <b>11</b> At a bus stop <input type="checkbox"/> | <b>12</b> Billboard Advert <input type="checkbox"/> |
| <b>98</b> Other (please specify): <input type="text"/>   |  |  |   |

# Your Qualifications

Please tick (✓) the box that corresponds to your highest qualification. If you are not sure which box to tick, please ask a member of staff to help.

- |  |  |   |
|--|--|---|
| <b>09</b> Entry level, eg ESOL, Basic Skills, WordPower, NumberPower <input type="checkbox"/>                                      | <b>01</b> Level 1, eg. NVQ level 1, GNVQ Foundation, First Certificate, less than 5 GCSEs, 1 AS level <input type="checkbox"/> | <b>02</b> Full Level 2, eg. 5 GCSEs A-C, GNVQ Intermediate, First Diploma, NVQ level 2, 1 A level, 2/3 AS levels <input type="checkbox"/> |
| <b>03</b> Full Level 3, eg. 2+ A levels, 4+ AS levels, GNVQ Advanced, AVCE, National Diploma, NVQ level 3 <input type="checkbox"/> | <b>04</b> Level 4, eg. HNC,HND, First Degree, Teaching qualification, NVQ level 4 <input type="checkbox"/>                     | <b>05</b> Level 5, eg Postgraduate certificate/diploma, Masters, Doctorate <input type="checkbox"/>                                       |
| <b>97</b> Other Qualifications below level 1 <input type="checkbox"/>  | <b>99</b> No qualifications <input type="checkbox"/>   |   |

Date you gained this qualification?

## Employer/Franchisee/Sponsor/School Details

**\*If you are being released by your employer to attend College, if you are being sponsored, or if you are of school age, please enter the details below.**

**\*If your employer is paying your fees we need a letter on headed paper confirming this.**

**\*If you are at school and taking an additional course here we need a letter from your school giving permission.**

Organisation Name:  Contact Details Name:

Organisation Postcode:  Tel:

Email:

**Are you being released by your employer to attend college?** Yes  No

**Will your employer be paying your course fees?**

**Yes, they will pay the college directly**

**Yes, paying me back the fees**

**No**

## Please answer the following questions:

**What is your employment status before the start of your course?**

- |  |   |            |
|--|---|------------|
| <b>01</b> Employed <input type="checkbox"/>            | <b>04</b> Unemployed <input type="checkbox"/>   | <b>E12</b> |
| <b>02</b> Full time education <input type="checkbox"/> | <b>05</b> Still at school <input type="checkbox"/>  |            |
| <b>03</b> Self employed <input type="checkbox"/>       | <b>06</b> Economically inactive (ie. not employed and not actively seeking work) <input type="checkbox"/> |            |

**If you are unemployed, how long have you been unemployed:**

- |   |   |            |
|---|---|------------|
| <b>01</b> Less than 6 months <input type="checkbox"/> | <b>04</b> 24-35 months <input type="checkbox"/>   | <b>E14</b> |
| <b>02</b> 6-11 months <input type="checkbox"/>        | <b>05</b> Over 36 months <input type="checkbox"/> |            |
| <b>03</b> 12-23 months <input type="checkbox"/>       |   |            |

**If you are employed, are you:**

- |   |   |            |
|---|---|------------|
| <b>01</b> In secure employment <input type="checkbox"/> | <b>02</b> Threatened with redundancy <input type="checkbox"/> | <b>E13</b> |
|---|---|------------|

**If you are employed, is your employer:**

- |  |   |            |
|--|---|------------|
| <b>01</b> Public Sector organisation <input type="checkbox"/>              | <b>05</b> Small/medium (10-49 employees) <input type="checkbox"/> | <b>E15</b> |
| <b>03</b> Large organisation (over 250 employees) <input type="checkbox"/> | <b>06</b> Medium (50-249 employees) <input type="checkbox"/>      |            |
| <b>04</b> Small organisation (1-9 employees) <input type="checkbox"/>      | <b>98</b> Not known <input type="checkbox"/>                      |            |

**If you are employed, which ONE of the following areas does your employer fit into?**

- |   |   |            |
|---|---|------------|
| <b>01</b> Agriculture <input type="checkbox"/>                      | <b>11</b> Professional services <input type="checkbox"/>                | <b>E11</b> |
| <b>02</b> Banking and business services <input type="checkbox"/>    | <b>12</b> Public administration and defence <input type="checkbox"/>    |            |
| <b>03</b> Construction <input type="checkbox"/>                     | <b>13</b> Services (other) <input type="checkbox"/>                     |            |
| <b>04</b> Distribution, hotels and related <input type="checkbox"/> | <b>14</b> Textiles and clothing <input type="checkbox"/>                |            |
| <b>05</b> Engineering <input type="checkbox"/>                      | <b>15</b> Transport and communications <input type="checkbox"/>         |            |
| <b>06</b> Food, drink and tobacco <input type="checkbox"/>          | <b>16</b> Utilities (Gas, Electricity & Water) <input type="checkbox"/> |            |
| <b>07</b> Health and Education services <input type="checkbox"/>    | <b>17</b> Chemicals <input type="checkbox"/>                            |            |
| <b>08</b> Manufacturing (other) <input type="checkbox"/>            | <b>97</b> Other <input type="checkbox"/>                                |            |
| <b>09</b> Metals and mineral products <input type="checkbox"/>      | <b>98</b> Not known <input type="checkbox"/>                            |            |
| <b>10</b> Mining and related industries <input type="checkbox"/>    |   |            |

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