

# 2021-22 ENROLMENT FORM

Course Title(s)  
(Please separate each course  
with a comma as appropriate)

## Information about you

Course start date

Unique Learner Number

National Insurance Number

Title

Surname

Forename(s)

Date of Birth (dd/mm/yyyy)

Age (on 31 August 2021)

Address

Tel (Home)

Tel (Mobile)

Email

## Contact Preference

- I wish to be contacted about courses or learning opportunities  
 I wish to be contacted for survey and research

## Contactable by

- Post  Email  
 Telephone  Text (SMS)

## Emergency Contact Details

Name and number

Are you a young person looked after by your local authority?  Yes  No

## Equal Opportunities

**Gender:**  Male  Female  Other

## Ethnicity

### White

- English/Welsh/Scottish/  
Northern Irish/British  
 Irish  
 Gypsy or Irish Traveller  
 Any other White background

### Mixed/Multiple Ethnic Group

- White & Black Caribbean  
 White & Black African  
 White & 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

### Other (please specify)

## Learning Difficulty and/or Disability

Do you have any learning difficulties and/or disabilities?  Yes  No

**LLDD and health problem category:** (please use 1 for primary disability/learning difficulty and 2 for all secondary disabilities/learning difficulties)

- |                                                            |                                                                     |                                                             |
|------------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Visual impairment                 | <input type="checkbox"/> Severe learning difficulty                 | <input type="checkbox"/> Other physical disability          |
| <input type="checkbox"/> Hearing impairment                | <input type="checkbox"/> Dyslexia                                   | <input type="checkbox"/> Other specific learning difficulty |
| <input type="checkbox"/> Disability affecting mobility     | <input type="checkbox"/> Dyscalculia                                | <input type="checkbox"/> Other medical condition            |
| <input type="checkbox"/> Profound complex disabilities     | <input type="checkbox"/> Autism spectrum disorder                   | <input type="checkbox"/> Other learning difficulty          |
| <input type="checkbox"/> Social and emotional difficulties | <input type="checkbox"/> Asperger's syndrome                        | <input type="checkbox"/> Other disability                   |
| <input type="checkbox"/> Mental health difficulty          | <input type="checkbox"/> Temp. disability after illness or accident | <input type="checkbox"/> Prefer not to say                  |
| <input type="checkbox"/> Moderate learning difficulty      | <input type="checkbox"/> Speech, language, comms needs              | <input type="checkbox"/> Not provided                       |

## Household Situation

- 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
- Learner lives in a single adult household with dependent children
- Learner has withheld this information
- None of above applies

## Employment

Before starting this course were you in full-time education or training?  Yes  No

### Employment Status

- In paid employment
- Not in paid employment, looking for work and available to start work
- Not in paid employment, not looking for work and/or not available to start work

### If employed, please indicate

- Self-employed  11 to 20 hours per week
- 0 to 10 hours per week  21 to 30 hours per week
- 31+ hours per week

### If employed, please indicate length of employment

- Up to 3 months  7 to 12 months
- 4 to 6 months  12 months or more

### If employed, please specify employer details

Name  Tel

Address

### If unemployed, please indicate length of unemployment

- 0 to 5 months  6 to 11 months  12 to 23 months  24 to 35 months  36 months or more

### Current benefit status indicator

- In receipt of Job Seekers Allowance (JSA)
- In receipt of Employment and Support Allowance – Work Related Activity Group (ESA WRAG)
- In receipt of another state benefit other than JSA, Universal Credit or ESA (WRAG)
- In receipt of Universal Credit



### How did you hear about the Marine Society College?

- |                                           |                                                 |                                                 |
|-------------------------------------------|-------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Existing learner | <input type="checkbox"/> Direct to website      | <input type="checkbox"/> Open event             |
| <input type="checkbox"/> Employer         | <input type="checkbox"/> Found by search engine | <input type="checkbox"/> School/college         |
| <input type="checkbox"/> Career advice    | <input type="checkbox"/> Friend or family       | <input type="checkbox"/> Social media advert    |
| <input type="checkbox"/> Co-worker        | <input type="checkbox"/> Newspaper advert       | <input type="checkbox"/> Other (please specify) |

### Computer/Internet Availability

- Do you have a computer at home?  Yes  No
- Do you have internet access (Wi-Fi) at home?  Yes  No

### Career Aim

What do you hope to achieve by doing the course?

### Learner Agreement (please read carefully)

#### PRIVACY NOTICE – 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 used for education, training, employment and well-being related purposes, including for research. The DfE and the English European Social Fund (ESF) Managing Authority (or agents acting on their behalf) may contact you in order for them to carry out research and evaluation to inform the effectiveness of training. Your information may also be shared with other third parties for the above purposes, but only where the law allows it and the sharing is in compliance with data protection legislation. You can agree to be contacted by other third parties by ticking any of the following boxes:

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

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:

**[www.gov.uk/government/publications/esfa-privacy-notice](http://www.gov.uk/government/publications/esfa-privacy-notice)**

**Consent Status:** I give consent for my details to be shared  Yes  No

## Learner Declaration

**I declare that the information I have disclosed is true and accurate to the best of my knowledge.**

1. I understand that if I have declared false, misleading or inaccurate information, or I have omitted to provide relevant information concerning my enrolment and any support needs, this may result in the cancellation of my enrolment or my permanent exclusion from the Marine Society College.
2. I confirm that I have been interviewed and assessed for this course and received advice and guidance as appropriate.
3. I understand the entry criteria for chosen programme of study and I understand my progression from this course towards my career aim.
4. In the event that – within a reasonable time of starting the course (normally eight weeks) – the Marine Society College considers that I am unable to work satisfactorily on a course for academic or behavioural reasons, then I accept that the Marine Society College may transfer me to another course or programme to assist me in dealing with the issues identified by the Marine Society College without recourse to the formal Disciplinary Procedures.
5. I understand the importance of 100% attendance and punctuality to enable me to succeed. My place on my course may be in jeopardy if I do not attend regularly and complete my work on time.
6. I understand that I am responsible for amounts due. I understand that once a course has started and I have attended any classes, no refund will be made if I choose to leave of my own volition. A full copy of the refund policy is available by request or online.
7. I understand that, if I have not paid fees because the Marine Society College is able to claim fee remission for my enrolment on my course, my photocopying allowance and examination costs may be met from the Learner Support Fund.
8. I agree to inform the Marine Society College of any relevant change of personal details or circumstance via a change of details form. I agree that it is my responsibility to ensure these details are kept up to date for all communication purposes.
9. Marine Society College may wish to take your photograph and/or film you taking part in learning activities. These images may appear in Marine Society College printed materials, press releases, be placed on our website/intranet or on other websites (operated by other agencies such as local and national press or publishers advertising Marine Society College courses etc.), used in promotional films, DVDs or on/in other media.
10. I understand the Marine Society College may share information with other agencies such as the Local Authority children's/adult services and the police in order to safeguard children, young people, and vulnerable adults, to help prevent crime and bring offenders to justice. Please tick here to agree
11. I understand that if I have declared false, misleading or inaccurate information, or I have omitted to provide relevant information concerning my enrolment and any support needs, this may result in the cancellation of my enrolment or my permanent exclusion from the Marine Society College.
12. I understand that I may be contacted after the completion of my programme of learning to establish whether I have entered employment or gone onto further training

In order to comply with Child Protection Legislation we are required to ask the following question: Do you have a criminal record?  Yes  No

Signature

Date //