

Learner support declaration

Full Name A	ge Gender Male Female Other	
Address	Postcode	
Contact Phone	Email address	
NI Number Emergency contact details		
Referred from / self referral		
Marital Status ○ Single ○ Living with partner ○ Married	○ Separated / divorced	
Residential Status O Living with parents O Private rental O Homeow	ner O Social Housing O Temporary accommodation	
O Homeless O Other		
Have you lived in the UK for the last 3 years and are a Yes No ID seen:	UK citizen?	
If no, please state your immigration status:		
If no, please state country of residency, if you do no	t have immigration status:	
○ Traveller ○ Mixed White and Black Africa	ner Chinese Mixed White and Asian In Mixed White and Black Caribbean Black Caribbean Black African Prefer not to say specify)	
Do you consider yourself to have a learning difficulty, disability and / or health problem? O Moderate Learning Difficulty O Severe Learning Difficulty O Dyslexia O Mental Health Difficulty Other Specific Learning Difficulty OVisual Impairment O Hearing Impairment O Disability Affecting Mobility Other Physical Disability O Speech, Language and Communication Needs O Asperger's Syndrome O Autism O ADHD O Other Illness / Medical Condition Other Learning Difficulty O Other Disability		
Primary support need:		
Additional information. Please tick all that apply to y	O Refugee	
English as a second languageSingle parRisk of redundancyOther that you wish to		
Do you have any unspent criminal convictions? Yes No If yes - please provide details of	on a separate sheet	







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Previous qualifications
Oher / level not known Entry level (A basic skill, ESOL or entry level qualification)
○ Level 1 (less than 5 GCSEs or other full level 1 qualification)
O Level 2 (5 or more GCSEs A*-C or 9-4 or other level 2 qualification)
Level 3 (4 or more AS, 2 or more A2 / A level or other full level 3)
Level 4 (a level 4 NVQ, a HNC/NHD or any other full level 4 qualification)
Level 5 (a level 5 NVQ, a Higher Degree or any other full level 5 qualification)
Are you currently in care?
○ Yes ○ No
Are you a care-leaver (i.e. you have spent some time in the past in foster care, residential care or other arrangement as a child)?
○ Yes ○ No
Are you a carer for someone else?
○ Yes ○ No
Which of the below best describes your current employment status? (Not required for under 18s)
○ Employed (Full Time) ○ Employed (Part Time) ○ Unemployed ○ Self-Employed
○ In education or training ○ Volunteering or similar unpaid work
If unemployed, are you currently actively seeking work?
○ Yes ○ No
If unemployed, how long have you been unemployed?
○ 1 month or less ○ 1-6 months ○ 6-12 months ○ More than 1 year
Data sharing
consent for my data to be shared with relevant agencies including Torbay Council and the UK Government's Department for Levelling Up, Housing and Communities
Privacy notice - personal to provider
Declaration
confirm that the information I have provided is accurate and true to the best of my knowledge
Signature Date



