



Office use only

Entered in MIS	Student No.
Date	Partner Provider

Please complete all sections of this form in full in CAPITAL LETTERS and sign where indicated on the back page.

1. PERSONAL DETAILS Title:

Mr Mrs Miss Ms Other

Sex (mandatory): This is your birth or legal sex. Female Male

Gender Identity (optional): This is how you choose to identify yourself.

Female Male Non-binary Other

Trans Female Trans Male Prefer not to say

Surname	
Forename(s)	
Previous Surname	
Known As	

Home Address			
Time spent at current Address	Years	Months	
Term Time Address (if different)			

National Insurance Number

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Date of Birth (DD/MM/YYYY) Age as of 31/08/2022

Mobile Number		Tel. Day	
Email		Tel. Evening	

2a. PARENT/CARER CONTACT DETAILS (Under 19s only) This information will be used for text/email alerts

Name	Relationship	Mobile No.
Email		Home No.
Address (if different from above)		

East Sussex College is committed to improving communication with our students and their parents, guardians or carers. We will use contact details stated here to provide:

• Specific information about students; e.g. exam deadlines and timetables, reminders about trips and visits, parents' consultation evenings, attendance issues.

• General information about the College; e.g. Term dates, Open Events, Showcase Events (Performing and Visual Arts), College closure.

2b. EMERGENCY CONTACT NUMBERS (Required for ALL Learners and will be used for contact in an EMERGENCY ONLY For Under 19s, this should be a different contact to your main parent/carer)

Name	Relationship
Mobile No.	Other Contact No.

3. ETHNIC ORIGIN

- | | | |
|---|--|--|
| <input type="checkbox"/> 31 English/Welsh/Scottish/Northern Irish/British | <input type="checkbox"/> 38 Other Mixed/Multiple Ethnic Background | <input type="checkbox"/> 44 African |
| <input type="checkbox"/> 32 Irish | <input type="checkbox"/> 39 Indian | <input type="checkbox"/> 45 Caribbean |
| <input type="checkbox"/> 33 Gypsy or Irish Traveller | <input type="checkbox"/> 40 Pakistani | <input type="checkbox"/> 46 Other Black/African/Caribbean Background |
| <input type="checkbox"/> 34 Other White Background | <input type="checkbox"/> 41 Bangladeshi | <input type="checkbox"/> 47 Arab |
| <input type="checkbox"/> 35 White and Black Caribbean | <input type="checkbox"/> 42 Chinese | <input type="checkbox"/> 98 Any Other Ethnic group |
| <input type="checkbox"/> 36 White and Black African | <input type="checkbox"/> 43 Other Asian Background | <input type="checkbox"/> 99 Not Provided |
| <input type="checkbox"/> 37 White and Asian | | |

4. NATIONALITY

Nationality	Date of Entry to the U.K./EEA		
Country of Normal Residence	Do you have a Visa? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If English is not your first language, please state <input type="text"/>	Do you have the right to study and work in the UK? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Have you been legally resident in the UK/EEA for the past 3 years? Yes <input type="checkbox"/> No <input type="checkbox"/>	Are you a refugee or asylum seeker? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If no, state country of residence <input type="text"/>	Have you applied under the EU settlement scheme? Yes <input type="checkbox"/> No <input type="checkbox"/>		
	<table border="1"> <tr> <td>Visa Expiry Date</td> <td>Visa Type</td> </tr> </table>	Visa Expiry Date	Visa Type
Visa Expiry Date	Visa Type		

Office Use Only: Verification of ID - please record evidence seen and last four digits of the document number (Passport, Birth Certificate or National ID card only)

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4. EQUALITY, DIVERSITY AND INCLUSION INFORMATION

We collect information on age, sex, gender, sexual orientation, disability, religion, and ethnic origin to monitor our performance on equality and diversity. All information provided will be treated in the strictest confidence.

4a. RELIGION

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Agnostic | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Buddhist | <input type="checkbox"/> No Religion |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Sikh |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Other |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> Prefer not to say |

4b. SEXUALITY

- Heterosexual
- Bisexual
- Homosexual
- Pansexual
- Asexual
- Prefer not to say

5. DISABILITIES AND LEARNING DIFFICULTIES

Do you consider yourself to have a learning difficulty, disability or health problem? Yes No

Do you require additional support as a result of this? Yes No

Do you have an Education, Health and Care Plan? Yes No

Please tick all reasons below that apply to you and that you wish to record:

- | | | |
|---|--|--|
| <input type="checkbox"/> 04 Vision impairment | <input type="checkbox"/> 11 Severe learning difficulty | <input type="checkbox"/> 17 Speech, Language & Communication needs |
| <input type="checkbox"/> 05 Hearing impairment | <input type="checkbox"/> 12 Dyslexia | <input type="checkbox"/> 94 Other specific learning difficulty |
| <input type="checkbox"/> 06 Disability affecting mobility | <input type="checkbox"/> 13 Dyscalculia | <input type="checkbox"/> 95 Other medical condition |
| <input type="checkbox"/> 07 Profound complex difficulties | <input type="checkbox"/> 14 Autism spectrum disorder | <input type="checkbox"/> 96 Other learning difficulty |
| <input type="checkbox"/> 08 Social and emotional difficulties | <input type="checkbox"/> 15 Asperger's syndrome | <input type="checkbox"/> 97 Other disabilities (please specify) |
| <input type="checkbox"/> 09 Mental health difficulty | <input type="checkbox"/> 16 Temporary disability after illness or accident | |
| <input type="checkbox"/> 10 Moderate learning difficulty | | |

From the list above, please state which is your Primary/Most Significant Learning Difficulty/Disability

6. PREVIOUS EDUCATION AND QUALIFICATION

Highest level of qualification achieved to date

Highest English & Maths qualifications achieved to date

LEVEL	EXAMPLES	PLEASE TICK
Entry Level	• Certificates in Adult Literacy & Numeracy, Entry Level Functional Skills	<input type="checkbox"/>
Level 1	• Less than 5 GCSEs at grades A*-C/9-4. • Award/Certificate/Diploma Level 1 • NVQ Level 1 • Level 1 Functional Skills	<input type="checkbox"/>
Level 2	• Award/Certificate Level 2 • Level 2 Functional Skills	<input type="checkbox"/>
Full Level 2	• GCSE/O Level (5 or more at grades A*-C/9-4) • 1 A Level/2 or 3 AS levels • BTEC First Diploma, Level 2 NVQ • Level 2 Functional Skills • Level 1 Functional Skills	<input type="checkbox"/>
Level 3	• Award/Certificate Level 3	<input type="checkbox"/>
Full Level 3	• 2 or more A Levels/4 or more AS Levels • NVQ Level 3 • National Diploma/Diploma Level 3 • Access to HE	<input type="checkbox"/>
Level 4	• HNC, Certificates of Higher Education, Teaching Qualifications (PTLLS), NVQ Level 4	<input type="checkbox"/>
Level 5	• Foundation Degree, HND	<input type="checkbox"/>
Level 6	• Bachelor's Degree	<input type="checkbox"/>
Level 7+	• Masters, PGCE, PHD	<input type="checkbox"/>
Other Qualifications		<input type="checkbox"/>
No Previous Qualifications		<input type="checkbox"/>

LEVEL	ENGLISH	MATHS
GCSE (Specify Grade)		
Functional Skills Level 2	<input type="checkbox"/>	<input type="checkbox"/>
Functional Skills Level 1	<input type="checkbox"/>	<input type="checkbox"/>
Functional Skills Entry Level 3	<input type="checkbox"/>	<input type="checkbox"/>
Functional Skills Entry Level 2	<input type="checkbox"/>	<input type="checkbox"/>
Functional Skills Entry Level 1	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
Please state which School/College you previously attended		
For Office Use Only: Signature:		PLR Checked <input type="checkbox"/>

7. COURSE DETAILS

COURSE CODE	COURSE TITLE	GROUP	START DATE	EXPECTED END DATE	HOURS	FEES

Total Fees:

8. YOUR EMPLOYMENT STATUS PRIOR TO STARTING YOUR COURSE

IN PAID EMPLOYMENT (If you ARE in paid employment, please answer the following)

Are you self-employed? Yes No

How many hours do you work on average per week?

0-10 hours per week 11-20 hours per week 21-30 hours per week More than 31 hours per week

LENGTH OF EMPLOYMENT (Please tick one)

Up to 3 Months 4-6 Months 7-12 Months More than 12 Months

NOT IN PAID EMPLOYMENT (If you are NOT in paid employment, please answer the following)

- I am looking for work and available to start work
 I am not looking for work and/or not available to start work

LENGTH OF UNEMPLOYMENT (Please tick one)

Less than 6 Months 6-11 Months 12-23 Months 24-35 Months More than 36 Months

I HAVE BEEN IN FULL TIME EDUCATION OR TRAINING JUST PRIOR TO ENROLLING

9. HOUSEHOLD SITUATION

- 01 No household member is in employment and the household includes one or more dependent children
 02 No household member is in employment and the household does not include any dependent children
 03 Learner lives in a single adult household with dependent children
 98 Prefer not to say
 99 None of these statements apply

10. PAYMENT DETAILS

Our preferred payment methods would be either Direct Debit/Instalment plan or Card Payment.

The College's Tuition Fee Policy sets out in detail the circumstances under which tuition fees are due and when they can be refunded. <https://www.escg.ac.uk/docs/policies/tuition-fee-policy/>

11. EMPLOYER PAYMENT

If your employer/sponsor has agreed to pay a contribution to your course fees you must provide a letter of authority with this enrolment form or ask your Employer to sign the agreement below and provide a purchase order number. Please complete all details below or attach a letter of authorisation on company headed paper.

I confirm that, to the best of my knowledge, the information on this form is correct. If the named learner is employed by me, I declare that they have a contract of employment. If the named learner is a volunteer within my organisation, they are unpaid. We agree to pay for the course(s) detailed and related costs.

Company Name & Address	Invoice address (if different)
Authorised Signature of Employer	Position in Company
	Name (PRINT)
	Tel.
	Email
Employer Contribution £	Purchase Order No.

Please note that payment is due within 30 days of receipt of invoice

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12a. FEE WAIVERS/REDUCTIONS

Please attach appropriate Declaration form

- Adult Level 2
 Adult Level 3 / National Skills Fund
 Maths & English (GCSE/FS)
 JSA
 ESA -All Categories
 Universal Credit
 Other eligible state benefit other than JSA, ESA(WRAG), Universal Credit
 16-19 Funding (inc those aged 19-24 with EHCP)
 Low Wage
 Entitled to 20% Reduction - tuition fees only
 Paid

12b. STUDENT PAYMENT

- Direct Debit/Instalment Plan
 Student Loan (Already in receipt of)
 Credit/Debit Card
 Cash
 Cheque (payable to ESCG)
 Invoice (Employer Only)
 Applied for Advanced Loan/HE Loan

Loan Application ID

13. CRIMINAL CONVICTIONS

ESCG is keen to support students with criminal convictions to help them succeed. Having a criminal record will not necessarily prevent you taking up a place, depending on the nature of the course and the circumstances of the offence.

Do you have an unspent criminal conviction Yes No

If you are applying for a course in teaching, health, social work, childcare or involving work with children or vulnerable adults, previous criminal convictions may affect your ability to attend work placements and possibly achieve your course.

Do you have a spent criminal conviction Yes No

If you have declared you have an unspent or spent criminal conviction you will receive a letter with an attached form. You will have 10 days to return the form to the Designated Safeguarding Lead who will review your disclosure and will inform you of any actions they may take. During this time your application/enrolment will be placed on hold pending review of your disclosure. You may be required to come in for an interview to discuss your disclosure further.

Please note that failing to complete this section or providing false information may lead to your application/enrolment being withdrawn. Any information you provide the College Group in relation to criminal convictions will only be disclosed to third parties if this is necessary in the interests of the safety and welfare of other students or staff.

If you are unsure about what to declare please seek advice from our Safeguarding Team (you do not need to give your name) or we suggest you seek advice from Citizens Advice Bureau or the Probation Service, Youth Offending Team or NACRO – www.nacro.org.uk

14. PRIVACY NOTICE

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.

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

PRIVACY STATEMENT

East Sussex College will collect and process your personal data under GDPR Article 6e (Public Task) in order for us to carry out our public task of providing education and training. Contact details will not be used for marketing or survey purposes without your consent, which can be withdrawn at any time. However the college will use the contact information to contact you in order to carry out our duties to you, for example to notify you of a change of course date, and also to obtain data where legally required, such as destination surveys or annual satisfaction surveys. Further information relating to this can be found at

www.escg.ac.uk/documents/policies/learner-privacy-statement/

Contact us on: 030 300 39699

Please return this form to the relevant campus

Campuses at:

Station Plaza, Hastings, TN34 1BA
Ore Valley, Hastings, TN34 3TT
Cross Levels Way, Eastbourne, BN21 2UF
Mountfield Road, Lewes, BN7 2XH
Denton Island, Newhaven, BN9 9BN

15. LEARNING AGREEMENT

In signing this learning agreement, you agree:

- That you have received appropriate advice and guidance on your choice of programme to assess your suitability in accordance with ESCG procedures.
- To accept responsibility for your own learning and to review your progress with the support of your tutor(s). To attend all required activities regularly and punctually and to account for any absences.
- To take responsibility for maintaining an acceptable standard of behaviour at College and whilst engaged in activities associated with ESCG.
- To agree to have your photograph taken for your College ID badge and to visibly wear this badge at all times whilst on campus.
- To complete all your work to the best of your ability and within specified deadlines, as required by your programme.
- To follow and respect published College policies, rules and regulations, copies of which are available on the ESCG network.
- That the information on this enrolment form/Learner Agreement is correct and that you will inform the College of any future changes.
- To look after all resources during use and to make sure they are properly issued and returned on time.
- To pay all fees due to ESCG within the time scale agreed at enrolment.
- To comply with copyright laws and licences regarding the copying of resources including DVDs and audio.
- If you are under the age of 19 on the 31 August 2022 we will share relevant information, all academic year, about your studies with your parent/guardian.
- We will share information about your studies with your employer if they are paying your fees.
- The College may pursue students for their examination fees if they fail to attend their examinations.
- You may be contacted after you have completed your programme of learning to establish whether you have entered employment or gone onto further training or education.

I have read the above information and declare that all details given on this form are correct

Marketing/Photography & Videography

On occasions the college will create marketing assets using photography or videography featuring students - by ticking the below box you consent to be photographed/filmed for use in course or college publicity to promote past/future events etc

I give my consent to be featured

Student Signature

Date

Parent/Guardian's Signature (if student is under 16)

Date

Staff Signature

Print

Date

Ext.



European Union
European Social Fund
Investing in jobs and skills

This project is part-financed by the European Union investing in jobs and skills