

Enrolment & Learning Agreement 2023/24

Learner Responsive and Full Cost (V1.0)

If you need help completing this form call 0117 3125000

UK Provider ref. no: 10001467

Unique Learner Number (if known)
Have you previously enrolled on a course at the City of Bristol College? If so please enter Student ID (if known)

We may contact you in regard information related to the ULN.

1.About you Please supply details as per your passport or birth certificate

Title	First name(s)
Middle Name	Surname
Previous Surname	Date of birth
Legal Sex <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	Preferred Pronoun <input type="checkbox"/> SHE/HER <input type="checkbox"/> HE/HIM <input type="checkbox"/> THEY/THEM
National Insurance Number	

Do you have any unspent criminal convictions, any outstanding court proceedings, or are you on any offenders register? Yes ☐ No ☐

If you declare that you have a conviction, you will be contacted for further information. This information will help us assess any potential risks to yourself or others at college. The college has a duty of care to all its staff and students to ensure that any risk to their safety is minimised. The college reserves the right not to enrol anyone who may pose a threat or danger to the safety of its staff and students. Having a criminal record will not necessarily prevent you studying at college but will depend on the nature of the course and the circumstances of the offence. If you do not disclose a conviction, this can result in disciplinary action or your enrolment being cancelled.

Ethnicity City of Bristol College values everyone as an individual, celebrates diversity, and is committed to equality of opportunity. The information you provide will be treated confidentially.

Please tick the option that applies to you:

<input type="checkbox"/> English / Welsh / Scottish / Northern Irish / British (31) <input type="checkbox"/> Irish (32) <input type="checkbox"/> Gypsy or Irish Traveller (33) <input type="checkbox"/> Any other White background (34) <input type="checkbox"/> Indian (39) <input type="checkbox"/> Pakistani (40) <input type="checkbox"/> Bangladeshi (41)	<input type="checkbox"/> Chinese (42) <input type="checkbox"/> Any other Asian background (43) <input type="checkbox"/> White and Black Caribbean (35) <input type="checkbox"/> White and Black African (36) <input type="checkbox"/> White and Asian (37) <input type="checkbox"/> Any other mixed / multiple ethnic background (38)	<input type="checkbox"/> African (44) <input type="checkbox"/> Caribbean (45) <input type="checkbox"/> Any other Black / African / Caribbean background (46) <input type="checkbox"/> White - Other <input type="checkbox"/> White - English/Welsh/Scottish/Northern Irish/British
Other ethnic group		
<input type="checkbox"/> Arab (47)	<input type="checkbox"/> Any other ethnic group (98)	<input type="checkbox"/> Not provided (99)

Contact details

Home House no.	Home postcode
Date from	Home address
Home telephone	
Mobile	
Email	

Term house no.	Term address
Term telephone	
Term postcode	

Emergency Contact

Name	
Relationship <input type="checkbox"/> Brother <input type="checkbox"/> Daughter <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other <input type="checkbox"/> Son <input type="checkbox"/> Spouse <input type="checkbox"/> Friend <input type="checkbox"/> Sister <input type="checkbox"/> Partner	
Email	Mobile
Other Contact number	Do you live together? <input type="checkbox"/> Yes <input type="checkbox"/> No

Parental Contact for Learners under 19

Name	
Relationship <input type="checkbox"/> Brother <input type="checkbox"/> Daughter <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Other <input type="checkbox"/> Son <input type="checkbox"/> Spouse <input type="checkbox"/> Friend <input type="checkbox"/> Sister <input type="checkbox"/> Partner	
Email	Mobile
Home telephone	Do you live together? <input type="checkbox"/> Yes <input type="checkbox"/> No
Other Contact number	Home address
Home postcode	

Why did you choose City of Bristol College?

<input type="checkbox"/> Recommendation from existing student	<input type="checkbox"/> Your employer	<input type="checkbox"/> Course guide	<input type="checkbox"/> Contacted College directly
<input type="checkbox"/> Social media post/advert	<input type="checkbox"/> Newspaper advert	<input type="checkbox"/> Course tutor	<input type="checkbox"/> Attended an Open Event
<input type="checkbox"/> Other			

Residence This section must be completed by all students

You may be required to provide further documentary evidence of your status in the UK.

Nationality	Home Country
Is English your first language? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If no, please specify	
Are you a UK National? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you lived in the UK for the last three years? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you an Irish National? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you lived in the UK /Ireland for the last three years? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you have answered no to any of the above questions – further assessments of your residency will need to be completed. To assist with this please answer the following questions:	
Are you an EEA national? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have "Settled or pre-settled" status? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Please provide supporting evidence confirming your eligibility to be in the UK	

For College Staff use only:																															
Funding Eligibility:	Residency Assessed by:																														
Residency Assessed Date:	Evidence Seen 1:																														
Evidence Seen 2:	Evidence Seen 3:																														
<h2>Support</h2>																															
Please indicate if you are:																															
Currently in care <input type="checkbox"/> Yes <input type="checkbox"/> No A care leaver <input type="checkbox"/> Yes <input type="checkbox"/> No A young carer <input type="checkbox"/> Yes <input type="checkbox"/> No																															
Are you a parent under 20 years old at the start of your course? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
Please indicate if you have an Education Health Care Plan (EHCP) <input type="checkbox"/> Yes <input type="checkbox"/> No																															
Do you consider yourself to have a disability and/or learning difficulty and/or health problem? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
We offer a range of additional support to help you achieve to the best of your ability. If you would like us to contact you regarding any advice or support for your course, please tick which of the following you require assistance with.																															
<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; vertical-align: top;"><input type="checkbox"/> ADD/ADHA</td> <td style="width: 33%; vertical-align: top;"><input type="checkbox"/> Hearing Impaired</td> <td style="width: 33%; vertical-align: top;"><input type="checkbox"/> Other Physical Disability</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Asperger's Syndrome</td> <td style="vertical-align: top;"><input type="checkbox"/> Learning Difficulty (Moderate)</td> <td style="vertical-align: top;"><input type="checkbox"/> Other Medical Condition (E.g Epilepsy, Asthma, Diabetes)</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Autism Spectrum Disorder</td> <td style="vertical-align: top;"><input type="checkbox"/> Learning Difficulty (Severe)</td> <td style="vertical-align: top;"><input type="checkbox"/> Prefer not to say</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Deaf Support BSL User</td> <td style="vertical-align: top;"><input type="checkbox"/> Literacy Need</td> <td style="vertical-align: top;"><input type="checkbox"/> Profound/Complex</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Deaf Support Oral User</td> <td style="vertical-align: top;"><input type="checkbox"/> Medical Condition</td> <td style="vertical-align: top;"><input type="checkbox"/> SEBD</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Disability Affecting Mobility</td> <td style="vertical-align: top;"><input type="checkbox"/> Mental Health</td> <td style="vertical-align: top;"><input type="checkbox"/> Social & Emotional Difficulties</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Dyscalculia</td> <td style="vertical-align: top;"><input type="checkbox"/> Mobility</td> <td style="vertical-align: top;"><input type="checkbox"/> Speech, Language and communication needs</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Dyslexia</td> <td style="vertical-align: top;"><input type="checkbox"/> Numeracy Need</td> <td style="vertical-align: top;"><input type="checkbox"/> Temporary Disability after Illness (for example Post-Viral) or Accident</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Dyspraxia</td> <td style="vertical-align: top;"><input type="checkbox"/> Other Disability</td> <td style="vertical-align: top;"><input type="checkbox"/> Visual Impairment</td> </tr> <tr> <td style="vertical-align: top;"><input type="checkbox"/> Exam Access Arrangements</td> <td style="vertical-align: top;"><input type="checkbox"/> Other Learning Difficulty</td> <td></td> </tr> </table>		<input type="checkbox"/> ADD/ADHA	<input type="checkbox"/> Hearing Impaired	<input type="checkbox"/> Other Physical Disability	<input type="checkbox"/> Asperger's Syndrome	<input type="checkbox"/> Learning Difficulty (Moderate)	<input type="checkbox"/> Other Medical Condition (E.g Epilepsy, Asthma, Diabetes)	<input type="checkbox"/> Autism Spectrum Disorder	<input type="checkbox"/> Learning Difficulty (Severe)	<input type="checkbox"/> Prefer not to say	<input type="checkbox"/> Deaf Support BSL User	<input type="checkbox"/> Literacy Need	<input type="checkbox"/> Profound/Complex	<input type="checkbox"/> Deaf Support Oral User	<input type="checkbox"/> Medical Condition	<input type="checkbox"/> SEBD	<input type="checkbox"/> Disability Affecting Mobility	<input type="checkbox"/> Mental Health	<input type="checkbox"/> Social & Emotional Difficulties	<input type="checkbox"/> Dyscalculia	<input type="checkbox"/> Mobility	<input type="checkbox"/> Speech, Language and communication needs	<input type="checkbox"/> Dyslexia	<input type="checkbox"/> Numeracy Need	<input type="checkbox"/> Temporary Disability after Illness (for example Post-Viral) or Accident	<input type="checkbox"/> Dyspraxia	<input type="checkbox"/> Other Disability	<input type="checkbox"/> Visual Impairment	<input type="checkbox"/> Exam Access Arrangements	<input type="checkbox"/> Other Learning Difficulty	
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What do you consider your main learning difficulty, disability or health problem?																															
Please use the space below to make us aware of any other conditions or issues or additional requirements you may have.																															
Have you had extra support in secondary school or other further education courses? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
Have you had any exam access arrangements, for example extra time or a reader? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
If yes, what were they?																															
Someone from the Additional Learner Support Team will get in touch with you if you have indicated you require assistance.																															
<h2>Last School/College attended</h2>																															
Are you currently enrolled at another Institution/learning provider? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
If yes, which Institution/provider:																															
Are you still active with this institution? <input type="checkbox"/> Yes <input type="checkbox"/> No																															
If yes, please provide the details of course/programme:																															
Date started																															

Household situation Please tick the option that applies to you

- ☐ 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 - Learner has withheld this information
☐ 99 - None of HHS1, HHS2 or HHS3 applies

Your Qualification

What is your highest level of Qualification (use the table below to help you pick the correct qualification level)

- | | | |
|---|---|--|
| <input type="checkbox"/> 01 – Entry Level | <input type="checkbox"/> 02 – Level 1 | <input type="checkbox"/> 03 – Level 2 |
| <input type="checkbox"/> 04 – Full Level 2 | <input type="checkbox"/> 05 – Level 3 | <input type="checkbox"/> 06 – Full Level 3 |
| <input type="checkbox"/> 07 – Level 4 | <input type="checkbox"/> 08 – Level 5 | <input type="checkbox"/> 09 – Level 6 |
| <input type="checkbox"/> 10 - Level 7 and above | <input type="checkbox"/> 11 – Other qualification,
level not known | <input type="checkbox"/> 98 – Not Known |
| <input type="checkbox"/> 99 – No Qualifications | | |

When did you achieve this qualification?

Entry level	QCF qualifications at Entry level Certificate in Adult Literacy, Numeracy, ESOL at Entry level RQF qualifications at Entry Level English and Maths qualifications at Entry Level such as Functional Skills
Level One	GCSE/O Level (at grades D-G or fewer than 5 at grades A-C or 4-9), CSE grade 2 and 3, 1 AS Level , QCF qualifications at Level 1 Foundation 14-19 Diploma, Functional Skills Certificate in Adult Literacy, Numeracy, ESOL at Level 1, Level 1 Key Skills, Level 1 Principal Learning, Introductory Diploma, Introductory Certificate, GNVQ Foundation, NVQ Level 1, RQF qualifications at Level 1, Technical Awards in the Key Stage 4 Performance Tables
Full Level Two	GCSE/O Level (5 or more GCSEs grades A*-C/4-9), 2 or 3 AS Levels, CSE Grade 1 (5 or more), 1 A Level, Higher 14-19 Diploma, QCF Diploma level 2 QCF Certificate level 2, Level 2 Principal Learning, NVQ level 2, GNVQ Intermediate, Technical Certificates in the 16-19 Performance Tables, QCF Certificate level 2 at 15 credits and above, From 1 August 2015 vocational qualifications of 150 GLH or more (see https://www.gov.uk/government/publications/qualificationsgetting approval-for-funding).
Full Level Three	A Levels (2 or more) 4 or more AS Levels, QCF Diploma Level 3, QAA Access to HE, Advanced 14-19 Diploma, GNVQ Advanced, NVQ level 3, AVCE double award, Tech Levels in the 16-19 Performance Tables, Applied Generals in the 16-19 Performance Tables, QCF Certificate at Level 3, From 1 August 2015 vocational qualifications of 300 GLH or more (see https://www.gov.uk/government/publications/qualifications-getting approval-for-funding).
Level Four	QCF Award/Certificate/Diploma at Level 4, HNC, RQF qualifications Level 4, Certificate of Higher Education, NVQ Level 4, Level 4 Professional Certificate, Level 4 Professional Diploma
Level Five	QCF Award/Certificate/Diploma at Level 5, HND, RQF qualifications Level 5, Foundation Degree, NVQ level 5, Level 5 Professional certificate
Level Six	QCF Award/Certificate/Diploma at Level 6, RQF qualifications Level 6, Bachelor Degree, graduate certificates and diplomas
Level Seven +	QCF Award/Certificate/Diploma at Level 7 or above, RQF qualifications Level 7 or above, Doctorates, Masters, post-graduate certificates and diplomas

GCSE results

	English Language Grade	Mathematics Grade	English Literature Grade
Did you achieve grade (4-9) by yr 11 of school?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Your Employment Status please complete the following section

Are you?

- ☐ Employed
 ☐ Self-employed
 ☐ unemployed, not looking for work and/or not available to start work
 ☐ unemployed, looking for work and available to start work

If employed - please tick the relevant employment categories below

- | | |
|---|---|
| <input type="checkbox"/> Employed for less than 10 hours per week | <input type="checkbox"/> Employed for 11-20 hours |
| <input type="checkbox"/> Employed for 21-30 hours | <input type="checkbox"/> Employed for 31+ hours |

If employed please tick the relevant employment length:

☐ Up to 3 months

☐ 4-6 months

☐ 7-12 months

☐ Over 12 months

Date employment started (dd/mm/yyyy)

If unemployed - please tick length of unemployment:

☐ Less than 6 months

☐ 36 months or over

☐ 6-11 months

☐ 24-35 months

☐ 12-23 months

2. Your Course

Course Code	Course Title	Start Date	Level	Hours/mins Per Week	Total Hours	Finish Date	Fee £	No. of weeks

Enter location postcode if any of your courses takes place off College premises

Please select the main reason for you doing this course:

☐ Unemployed – getting back into education

☐ Employed – assist me to get a better paid job

☐ Unemployed – first of many steps to employment

☐ Employed - required for work

☐ Help me to get involved in voluntary work

☐ To move to higher education

☐ Help me live in the local community

☐ 16-18 learner not applicable

☐ Employed – increase knowledge for work

☐ EHCP Learner not applicable.

☐ Employed – help me change careers

☐ Unemployed – to allow me to potentially enrol onto a higher-level course

How are you undertaking the course?

☐ Remotely At home

☐ On Provider Premises

☐ In my workplace as one to one

☐ On Provider Premises and at home

☐ As part of group at specific different locations

3. Fee payment

Course fees should be paid in full at the time of enrolment. However, depending on your age, previous qualifications and the level of the course, you may be entitled to fee concession. Further information is available from the College website and course guides.

Aged 16-18? No fees payable

Aged 19-23? You may be entitled to fee concession for your first Full Level 2 and First Full Level 3 qualification if the course is eligible for legal entitlement or Intended Progression to Level 2.

3A. Please tick one of the following:

☐ I intend to pay in full

☐ I intend to pay in full however wish to discuss payment plan options if available

☐ I am being sponsored to study this course (please make sure you complete the related information in the below section)

3B. Who is paying for your course?

****If your employer or training agent is paying your fees please complete this section and attach a letter (on company headed paper) or Authority to Invoice Form from your Employer/Training Agent authorising payment of your course fees.**

Name of organisation	
Building No.	Postcode
Street	Town
Tel	Contact name
I attach a letter or Authority to Invoice Form from my employer/training agent authorising payment of my course fees <input type="checkbox"/>	

3C. In certain circumstances there are no fees because they may be waived. Please tick one of the boxes below if you feel you meet one of the categories:

I am under 19 on the 31st of August 2023 and therefore I will not be paying tuition fees (please note you may still have other fees to pay)		
L2 ESFA/ WECA	I am between 19 and 23 studying a full Level 2 qualification (defined within the ESFA/WECA legal entitlement) and I do not already hold a full Level 2.	<input type="checkbox"/>
L2 WECA ONLY	I am 50+ Learner enrolling onto their first or second full level 2 qualification with WECA Post Code (where Prior Attainment is L2 or below).	<input type="checkbox"/>
L3 ESFA/ WECA	I am 19-23 learner enrolling onto their first full level 3 qualification. (Prior Attainment is not Full L3 or above)	<input type="checkbox"/>
WECA ONLY	I am 19-25 and 50+ Learner enrolling onto their first full level 3 or second full level 3 qualification (where Prior Attainment is not L4 or above).	<input type="checkbox"/>
NSF ESFA/ WECA	I am 19+ Learner enrolling onto their first full level 3 qualification within the National Skills Fund/FCFJ offer. (Prior Attainment is not Full L3 or above)	<input type="checkbox"/>
NSF WECA ONLY	I am 19+ Learner enrolling onto an additional level 3 short award qualification within the National Skills Fund – Level 3 offer and with WECA Post Code. Prior Attainment is not Full L3 or above	<input type="checkbox"/>
NSF ESFA/WECA	I am a 19+. This is my first L3 course funded through the NSF/FCFJ (excl. short award) and I am earning less than the national living wage. Regardless if Prior Attainment is Full L3 or above.	<input type="checkbox"/>
NSF ESFA/WECA	I am a 19+ Learner who is unemployed. This is my first L3 course funded through the NSF/FCFJ (excl. short award). Regardless if Prior Attainment is above Full L3 or above.	<input type="checkbox"/>

This information will be verified against your Personal Learning Record which is held with the Learning Records Service, failure to give the correct information will result in your claim for fee remission being refused and the College taking further steps to recover any outstanding amounts once you have started your course.

Prior qualifications

Please indicate which qualifications you have completed in the past including any international qualifications. Where you have no previous qualifications please state **"None"**.

Date Achieved	Details of qualification(s) / courses completed or currently undertaking	Level / Grade Achieved

3D. Benefits

I am not paying fees because I am in receipt of one of the following and wish to enrol on a qualification that is available for ESFA fee remission. I will provide evidence of this claim (dated within the last 3 months) along with my National Insurance Number at the time of enrolment.	<input type="checkbox"/>
Job Seekers Allowance (including national insurance credits only)	<input type="checkbox"/>
Employment Support Allowance	<input type="checkbox"/>
Universal Credit take home pay (excluding benefits is less than £617 a month (sole claim) or £988 a month (joint claim))	<input type="checkbox"/>

None of the above benefits apply and you receive other state benefits and want to be employed, or progress into more sustainable employment. Your take home pay (disregarding Universal Credit payments and other benefits) is less than £617 a month (Sole) or £988 a month (Joint): Please confirm which of the following 'State Benefits' do you receive:

Are you an unwaged dependant?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Council Tax	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Income Support	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Housing Benefit	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Disability Living Allowance / Personal Independence Payment	<input type="checkbox"/> Yes	<input type="checkbox"/> No
My partner receives Working Tax Credit and I am named on the letter	<input type="checkbox"/> Yes	<input type="checkbox"/> No			

Please explain briefly how this course will help you gain employment or improve your current employment in the subject area:

3E. LOW Wage

I am not paying fees because I am an employed learner living within the WECA area and earn an annual gross salary of less than £21,255.00.	<input type="checkbox"/>
I am not paying fees because I am an employed learner not living within the WECA area and earn an annual gross salary of less than £20,319	<input type="checkbox"/>

OFFICE USE ONLY – College Staff / Subcontracting Partner to complete:

I can confirm that this student meets the ESFA residency requirements. Please tick what evidence you have seen confirming the student earns less than £21,255 (WECA) or £20,319 (ESFA) – evidence must be within 3 months of the student's start date.

- 1 monthly wage slip – within the last 3 months based on student's start date - Basic pay/gross salary (not net pay) x 12 ☐
- 1 week's wage slip – within the last 3 months based on student's start date - Basic pay/gross salary (not net pay) x 52 ☐
- Current employment contract which states gross monthly / annual wages ☐
- Self-employed – a copy of their latest accounts - Average over the months stated ☐

Staff Name	Staff Signature
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The College may share your data with other organisations for education, training, employment, research and well-being related purposes. Further details are available on the College website <http://www.cityofbristol.ac.uk/privacy-statement/>

College use only

Course Fee variation	Reason
Signature	
Adjustment for Prior Learning:	
Learning aim	Credits achieved

ILR Privacy Notice 2023/24

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 wellbeing 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. In these cases, it is part of our statutory duties and we do not need your consent. 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 DfE online contact form https://form.education.gov.uk/service/Contact_the_Department_for_Education
- By telephoning the DfE Helpline on 0370 000 2288
- 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>

The College will contact you about your courses by Phone, Post, E-Mail and / or SMS.

Do you agree to being contacted for other purposes:

Internal marketing consent	<input type="checkbox"/> Yes <input type="checkbox"/> No	External marketing consent	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Please select how you would like to be contacted for external marketing:

By phone ☐

By post ☐

By email ☐

By SMS ☐

Generally, the information is processed as part of our public interest task of providing education to you. For 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: cityofbristol.ac.uk/privacy-statement

As Data Controller, the College may share non-sensitive personal information with other organisations as set out on its Data Protection registration and from 25 May 2018, General Data Protection Regulation. The College may share your information with other organisations for education, training, employment, research and well-being related purposes.

Further details are available on the College website <http://www.cityofbristol.ac.uk/privacy-statement/>. If at any time you wish to stop receiving these messages, please contact Student Services on 0117 312 5000 or enquiries@cityofbristol.ac.uk and change your preferences or opt-out at any time.

- Sensitive information: The College may use this information to ensure equality of opportunity, support your studies, minimise risk and for anonymous statistics. We are required to share it with the relevant government departments as mentioned above. We will ask you before sharing it with others

4. Student Declaration

- I declare that the information I have disclosed is true and accurate to the best of my knowledge. I understand that if I have declared false information the college will act against me to reclaim the course fees and any associated costs.
- I agree to abide by the City of Bristol College Student Charter.
- I have been informed of and understand the entry requirements for my course, the guided learning hours, the nature and suitability of the course, the costs involved, what it leads to and how to contact the College for support and advice services.
- I understand that if the mode of delivery is disrupted due to unforeseen circumstances, the college will endeavour to continue high-quality delivery via an online or alternative learning platform. In this instance, there will be no reduction in course fees. If I do not wish to continue studying on that basis, the college would advise me of the financial implications of my discontinuing or suspending my studies.
- As published in the College's Fees Policy, I understand that I am responsible for any fee amounts due, and that if I stop attending before the end of the course, I will continue to be responsible for the payment of any outstanding balance that remains (in full or in part). I also confirm that I understand the refund policy as outlined in the Fees Policy.
- I understand that in the event of unpaid fees my details may be passed on to a Debt Collection Agency, who will act on behalf of the college for recovery.
- I agree to inform City of Bristol College of any relevant changes of personal circumstances or change of course.
- I understand that any kit or learning resources provided as a reduced/zero cost to me will remain the property of City of Bristol College until such time as I complete my programme of study/course and achieve my qualification.
- I understand that if my Employer or Training Agent is supporting my learning progress, reports may be provided to them.
- I am aware of the College's complaints procedure, how to access it and raise a complaint.
- I confirm I understand how my data is being used and my contact preferences are as above.

Documentation relating to the above policies can be found at www.cityofbristol.ac.uk/about-us/college-policies/

Date	College Staff Name
College Staff Signature	Student Signature

Thank you for completing this form. It will enable us to plan for the diverse needs of our students.

Please e-mail the completed form to enrolments@cityofbristol.ac.uk. For other enquiries, call 0117 312 5000 or email enquiries@cityofbristol.ac.uk