

# 2026/27 ENROLMENT FORM

PLEASE COMPLETE **ALL** SECTIONS (• WHERE INDICATED) OF THIS FORM IN **BLOCK CAPITALS & BLACK PEN** (TICK WHERE APPROPRIATE). CONSULT COURSE GUIDELINES AND OUTLINES BEFORE COMPLETING THIS FORM.

• Are you currently a full-time student at any other School, College or Training Provider?

 Yes

 No

## • 1. Personal Details

Title:	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms Other:	Unique Learner Number (ULN) No:	<input type="text"/>
First name(s):	<input type="text"/>	Home Address:	<input type="text"/>
Preferred name:	<input type="text"/>		
Middle name:	<input type="text"/>		
Surname:	<input type="text"/>	Postcode:	<input type="text"/>
Surname at birth/ maiden name:	<input type="text"/>	Time at current address:	Years <input type="text"/> Months <input type="text"/>
Date of Birth:	<input type="text"/>	Email:	<input type="text"/>
Biological Birth Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female Preferred Pronoun:	Tel No:	<input type="text"/>
Identifies as:	Gender: <input type="text"/> Considers Self Trans <input type="checkbox"/>	Mobile No:	<input type="text"/>

Do you have any unspent criminal convictions?  Yes  No

Any information you give will be confidential and will be considered only in relation to this enrolment. An unspent criminal conviction does not necessarily prevent you from enrolling.

## • 2. ID check - Identity verification (third party ID) ID must be seen prior to enrolment

ID Checked?

<input type="checkbox"/> Passport (2)	<input type="checkbox"/> National Insurance card (5)	<input type="checkbox"/> Examination results slip/certificate (9)	Staff Initials:
<input type="checkbox"/> Driving Licence (3)	<input type="checkbox"/> Bank credit/debit card (7)	<input type="checkbox"/> Other (999):	
<input type="checkbox"/> ID card/other National ID (4)	<input type="checkbox"/> Birth Certificate (1)		

## • 3. Ethnic Origin (please tick below)

White	Mixed	Asian / Asian British	Black	Other Ethnic group
<input type="checkbox"/> British/English/Welsh/ Scottish/Northern Irish (31)	<input type="checkbox"/> White & Black Caribbean (35)	<input type="checkbox"/> Indian (39)	<input type="checkbox"/> African (44)	<input type="checkbox"/> Arab (47)
<input type="checkbox"/> Irish (32)	<input type="checkbox"/> White & Black African (36)	<input type="checkbox"/> Pakistani (40)	<input type="checkbox"/> Caribbean (45)	<input type="checkbox"/> Any other (98)
<input type="checkbox"/> Gypsy or Irish Traveller (33)	<input type="checkbox"/> White & Asian (37)	<input type="checkbox"/> Bangladeshi (41)	<input type="checkbox"/> Other Black background (46)	
<input type="checkbox"/> Other White background (34)	<input type="checkbox"/> Other Mixed background (38)	<input type="checkbox"/> Chinese (42)		
		<input type="checkbox"/> Other Asian background (43)		

## • 4. Residency Status (Complete where applicable) (• must be completed)

Nationality:	<input type="text"/>	Country of Residence:	<input type="text"/>
Have you lived in the UK/EEA for the last 3 Years?	<input type="checkbox"/> Yes <input type="checkbox"/> No (If no, please complete the below)		
Pre-settled/Settled Status held (EEA nationals)	<input type="checkbox"/> Settled <input type="checkbox"/> Pre-Settled <input type="checkbox"/> None	Pre-Settled/Settled Status date:	<input type="text"/>
Date of Entry to UK: (non-UK residents)	<input type="text"/>		
Non-EEA (Please confirm your residency status)	* Exempt from 3 year Residency rules - documentation must be sighted to validate status		
<input type="checkbox"/> Asylum Seeker (6 month residency)	<input type="checkbox"/> Afghan Relocation Scheme	<input type="checkbox"/> Family Member Visa or Legal EU/EEA Citizen	<input type="checkbox"/> Work Visa
<input type="checkbox"/> Humanitarian Protection*	<input type="checkbox"/> Exceptional Leave to Enter/Remain*	<input type="checkbox"/> Ukraine Visa Scheme	<input type="checkbox"/> Refugee*
<input type="checkbox"/> Discretionary Leave to Enter/Remain*	<input type="checkbox"/> Stateless Leave (3 year residence required)	<input type="checkbox"/> Indefinite Leave to Enter/Remain*	<input type="checkbox"/> Husband/wife/civil partner/child of any of the above marked with*
Evidence seen:	<input type="text"/>	Expiry Date:	<input type="text"/> / <input type="text"/> / <input type="text"/>
		Checked by:	<input type="text"/>

## • 5. Emergency Contact Details (Please provide 2 contacts)

Name:	<input type="text"/>	Name:	<input type="text"/>
Tel No:	<input type="text"/>	Tel No:	<input type="text"/>
Relationship to you:	<input type="text"/>	Relationship to you:	<input type="text"/>
Email:	<input type="text"/>	Email:	<input type="text"/>

## 6. Support / Education details (Only complete if under 18yrs old)

Are you a young carer?

Yes  No

Are you a young parent?

Yes  No

Are you a looked after child?  
(Registered in care)

Yes  No

Are you a Care Leaver?

Yes  No

Do you currently get Free School Meals?

Yes  No

Previous School/College:  
(16-18 yr olds only)

Year of leaving:

## 7. Primary Health Problems (Providing this information does not in any way affect your place on a course. We may be able to offer you extra support)

Do you consider yourself to have a learning difficulty and/or disability?  Yes (please tick all that apply below)  No

- |  |  |   |  |  |
|--|--|---|--|--|
| <input type="checkbox"/> Vision Impairment             | <input type="checkbox"/> Social & Emotional Difficulties | <input type="checkbox"/> Dyslexia                                       | <input type="checkbox"/> Speech, Language & Communication Needs              | <input type="checkbox"/> Other Medical Condition (e.g. epilepsy, asthma, diabetes) |
| <input type="checkbox"/> Hearing Impairment            | <input type="checkbox"/> Mental Health Difficulty        | <input type="checkbox"/> Dyscalculia                                    | <input type="checkbox"/> Down Syndrome                                       | <input type="checkbox"/> Other Learning Difficulty                                 |
| <input type="checkbox"/> Disability Affecting Mobility | <input type="checkbox"/> Moderate Learning Difficulty    | <input type="checkbox"/> Autism Spectrum Disorder                       | <input type="checkbox"/> Other Physical Disability                           | <input type="checkbox"/> Other Disability  |
| <input type="checkbox"/> Profound Complex Disabilities | <input type="checkbox"/> Severe Learning Difficulty      | <input type="checkbox"/> Temporary Disability after illness or accident | <input type="checkbox"/> Other Specific Learning Difficulty (e.g. Dyspraxia) |  |

Do you have any medical conditions?  
(e.g Asthma, Epilepsy, Diabetes)

Yes  No

If yes, please state:

What do you consider your primary condition to be?

Do you have any support in exams?  
(If yes, please request your Form 8/9 from school)

Yes  No

If yes, please state:

Do you have an EHCP?  
(Education, Health and Care Plan)

Yes  No

Do you need any support for your Special Educational Needs or Health problems?

Yes  No

## 8. Prior Attainment - Your prior attainment will be checked against the information held in your personal learning record (PLR). If the PLR contradicts the prior attainment provided, course fees may apply

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Entry Level</b> (Entry Level quals inc. English, maths, ESOL, Digital Skills) <sup>(01)</sup>   | <input type="checkbox"/> <b>Level 4</b> (HNC, AAT L4) <sup>(07)</sup>                         |
| <input type="checkbox"/> <b>Level 1</b> (GCSE grades D-G or 1-3 (or less than 5 A-C or 4-9)) <sup>(02)</sup>  | <input type="checkbox"/> <b>Level 5</b> (HND, Foundation Degree) <sup>(08)</sup>              |
| <input type="checkbox"/> <b>Level 2</b> (Functional Skills, ESOL, non entitlement quals) <sup>(03)</sup>  | <input type="checkbox"/> <b>Level 6</b> (First Degree (Hons)) <sup>(09)</sup>                 |
| <input type="checkbox"/> <b>Full Level 2</b> (5 GCSE grades A-C or 4-9, 3 AS Levels) <sup>(04)</sup>  | <input type="checkbox"/> <b>Level 7 and above</b> (Doctorates, Masters, PGCE) <sup>(10)</sup> |
| <input type="checkbox"/> <b>Level 3</b> (Core maths, technical quals (T Levels), non entitlement quals) <sup>(05)</sup>   | <input type="checkbox"/> <b>Other Qualifications</b> <sup>(07)</sup>                          |
| <input type="checkbox"/> <b>Full Level 3</b> (2 or more A Levels, 4 AS Levels, Access to HE Diploma, T Level, Level 3 NVQ, Award, Certificate or Diploma) <sup>(06)</sup> |   |

Name of Highest Qualification:

Do you hold a GCSE English?

Yes  No

Grade:

Do you hold Functional Skills English?

Yes  No

Grade:

Do you hold a GCSE Maths?

Yes  No

Grade:

Do you hold Functional Skills Maths?

Yes  No

Grade:

## 9. Programmes of Study

Code	Subject	Day	Time	Start Date	Planned End Date	Planned Hours

## 10. Declaration of Student

### How We Use Your Personal Information

This privacy notice is issued 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 UK 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 each year under the terms of a funding agreement, contract or grant agreement. It helps ensure that public money is being spent in line with government targets. It is also used for education, training, employment, and well-being 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.

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 our online contact form [https://form.education.gov.uk/service/Contact\\_the\\_Department\\_for\\_Education](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, 4th floor, 2 St Paul's Place, 125 Norfolk Street, Sheffield, S1 2FJ

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>

### College Data Processing Notice

Craven College takes privacy seriously and will only use the personal information provided on this form for the purposes of administration of your position as a student with us. All data will be processed lawfully and in accordance with Article 6 of the GDPR. The College will occasionally share your data with third parties. Where sharing is not part of our statutory duties, you can give your consent to be contacted by other third parties about:

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

(Please tick relevant boxes to give your consent)

Further information, please visit: [www.craven-college.ac.uk/about-craven-college](http://www.craven-college.ac.uk/about-craven-college)

### Learner Declaration

I declare that the information I have disclosed is true and accurate to the best of my knowledge. I agree to abide by Craven College's Code of Conduct. 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, financial/academic support that may be available and what it leads to. I understand I am responsible for amounts due, understand the fees, charging and refund policy and how to contact the college support & advice services. I understand and accept that my named parent(s)/guardian or my employer/sponsor may be informed about my performance. I consent to my contact information being shared with my work placement employer. I agree to inform Craven College of any relevant change of personal circumstances or change of course which may affect any concessions given at the time of enrolment. Where this affects the fees due, I agree to pay the difference. You are also authorising the college to collect and release non-sensitive information for other purposes as set out in the college's data protection registration. A more detailed explanation and further information on data confidentiality is available on request from the Data Protection Officer.

Student Signature

Date

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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STAFF USE:  Received from personal email address

Staff Signature

Staff Name

Date

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**ADULT FEES 19+ ONLY**

**11. Employment Status**

National Insurance (NI) No:

**Employed**

I am in paid employment <sup>(10)</sup>  
 and I am self employed

Number of hours employed per week:

0–10 hours <sup>(5)</sup>                       21–30 hours <sup>(7)</sup>  
 11–20 hours <sup>(6)</sup>                       31 hours or more <sup>(8)</sup>

How long have you been in employment?

up to 3 months <sup>(1)</sup>                       7–12 months <sup>(3)</sup>  
 4–6 months <sup>(2)</sup>                       12+ months <sup>(4)</sup>

Is your employer releasing you to study on your course(s)?  (Yes)

**Not Employed**

I am not in paid employment  
 and I am looking for work <sup>(11)</sup>  
 and I am not looking for work and/or not available to start work <sup>(12)</sup>  
 I am retired

How many months have you been unemployed?

Less than 6 months <sup>(1)</sup>                       24–35 months <sup>(4)</sup>  
 6–11 months <sup>(2)</sup>                       Over 36 months <sup>(5)</sup>  
 12–23 months <sup>(3)</sup>

**12. Proof of ID – STAFF USE**

(Name, D.O.B, Gender)

Passport <sup>(2)</sup>  
 Driving Licence <sup>(3)</sup>  
 Birth Certificate <sup>(1)</sup>  
 Other:

**Address Confirmation**

Driving Licence  
 Payslip / P60 / Self-Employed Evidence  
 Benefit Evidence  
 Utility Bill / Bank Statement (dated within the last 3 months)

Resident in North Yorkshire  
D.O.B and address seen

Resident in West Yorkshire  
D.O.B and address seen

Resident in Lancashire  
D.O.B and address seen

Checked by  
Staff Initials:

**13. Fee Remission**

Please confirm your circumstances and tick the relevant box for fee remission consideration:

I declare that I **DO NOT** already have a:

Full Level 2 qualification or above                       Full Level 3 qualification or above

Please confirm your circumstances and tick the relevant box:

My total earnings, excluding benefits and/or pension, are less than £26,800 gross a year on average

I am unemployed and I am looking for work, and this programme is relevant to my employment prospectus

**STAFF USE:**  I can confirm the learners income is less than £26,800

Checked by – Staff Initials:

Are you claiming any state benefits? (regardless of employment status)

Job Seeker Allowance (JSA)                       Employment Support Allowance (ESA)                       Universal Credit (UC)

Other:

**STAFF USE – Fee Remission evidence seen**

Checked by – Staff Initials:

Wage Slip(s)                       Universal Credit                       Employment and Support Allowance (ESA)                       Jobseeker’s Allowance (JSA)                       Evidence of Self-Employment                       Bank Statements

Learner may be eligible for a reduction in fees if any of the following apply:

ASF (Low wage/benefits)                       Tailored Learning                       First Full Level 3  
 Co-Funded                       English/Maths                       Free Courses For Jobs  
 Digital Skills                       First Full Level 2                       Staff Development

Staff Signature

Staff Name

**14. Learner Paying Fees – STAFF USE**

Option	Amount Due	Amount Paid	Amount Invoiced
Course Fee:			
Exam Fee:			
Materials:			
Other:			
<b>Total:</b>			

Payment Method:

Cash                       Card                       Direct Debit  
 Cheque                       Employer                       Online  
 Phone

**Loans**

Advanced Learning Loan  
 HE Loan

Loan Amount:

Receipt No:

Attach copy of receipt to enrolment form

Staff Signature

Date: