

Student ID Code:  
(If known)

# ENROLMENT FORM 2008/2009

**PLEASE USE BLOCK CAPITALS**

\* Delete as necessary

Title: **Mr/Mrs/Miss/Ms\*** **Male/Female\***

Surname/Family Name:

First Names:

Date of Birth:

Tel. Day: \_\_\_\_\_  
 Tel. Evening: \_\_\_\_\_  
 Mobile: \_\_\_\_\_  
 Email: \_\_\_\_\_

Address:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Postcode: \_\_\_\_\_

How long have you lived at your current address?  
 \_\_\_\_\_  
 Have you been resident in the UK/European Union for the last 3 years?  
 Yes  No   
 If no, this may affect your fee - please ask a Student Adviser for more information

**Are you in receipt of an income based state benefit?** Yes  No

If yes please include a photocopy of proof of benefit with your enrolment (dated within the last six months)

	Course Code:	Course Name:	Amount you are paying (£):	Course Information & Advice:	Office Use Only:
1 <sup>st</sup> Choice					
2 <sup>nd</sup> Choice					
1 <sup>st</sup> Choice					
2 <sup>nd</sup> Choice					
1 <sup>st</sup> Choice					
2 <sup>nd</sup> Choice					
<b>TOTAL AMOUNT:</b>					

**Refund Policy**  
 In the event that you need to cancel your enrolment you can have a full refund of tuition fees, provided that we are notified in writing within one week of the starting date of the course. Please note all courses include an administration charge which is stated in the College prospectus, which is non-refundable. For further details and information please contact a member of staff on 01702 445700 who will be happy to assist you.

I confirm that the details contained on all sides of this form are correct. I have received enough information about the course(s) for which I am enrolling to make an informed choice and I am aware of the range of support that is available to help my learning.  
 Signed: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Please complete all 4 pages of this enrolment form**

## Equal Opportunities

The College is committed to ensuring equality for all current and potential students irrespective of disability, age, race, gender, special educational needs, religion, sexual orientation, marital status or learning difficulty. To enable the LSC to ensure that we are providing education and training for all, regardless of any disability or learning difficulty, we are asked to collect details of any disability or learning difficulty. **For wheelchair users and those with mobility difficulties the information will be used to inform health and safety in the event of an evacuation.**

Please tick the appropriate box

- Wheelchair user
- Visual Impairment
- Hearing Impairment
- Mobility affected by disability
- Other Physical disability
- Other medical condition (for example epilepsy, asthma, diabetes)
- Emotional/Behavioural difficulties
- Mental Health difficulty
- Temporary disability after illness (for example post-viral) or accident
- Profound complex disabilities
- Aspergers syndrome
- Multiple disabilities
- Other
- No disability
- Do not wish to provide this information

OFFICE USE ONLY
00
01
02
03
04
05
06
07
08
09
10
90
97
98
99

If you wish a Student Adviser to contact you to discuss any support you may require, please tick this box

## Emergency Contact Number

In the event of an emergency, please supply a name and telephone number of a person you would wish us to contact

Name \_\_\_\_\_ Telephone No \_\_\_\_\_

## How would you describe your background? Please tick below

<input type="checkbox"/> Asian or Asian British – Bangladeshi	<input type="checkbox"/> Mixed – White and Asian
<input type="checkbox"/> Asian or Asian British – Indian	<input type="checkbox"/> Mixed – White and Black African
<input type="checkbox"/> Asian or Asian British – Pakistani	<input type="checkbox"/> Mixed – White and Black Caribbean background
<input type="checkbox"/> Asian or Asian British – Any other Asian background	<input type="checkbox"/> Mixed – Any other Mixed background
<input type="checkbox"/> Black or Black British – African	<input type="checkbox"/> White – British
<input type="checkbox"/> Black or Black British – Caribbean	<input type="checkbox"/> White – Irish
<input type="checkbox"/> Black or Black British – Any other Black background	<input type="checkbox"/> White – Any other White background
<input type="checkbox"/> Chinese	<input type="checkbox"/> Not Known / Not Provided
<input type="checkbox"/> Any other background _____	

## Data Protection Act 1998

The information you provide on this form will be passed to the Learning and Skills Council (the LSC). The LSC is responsible for funding, planning and encouraging education and training for young people and adults in England, and is registered under the Data Protection Act 1998. The information you provide will be shared with other organisations for the purpose of administration, careers and other guidance, and statistical and research purposes. Other organisations with which we will share information include, the Department for Children, Schools and Families, the Department for Innovation, Universities and Skills, Connexions, Higher Education Statistics Agency, Higher Education Funding Council for England, educational institutions and organisations performing research and statistical work on behalf of the LSC or its partners. The LSC also administers the learner registration service (LRS) which will use your information to create and maintain a unique learner number (ULN). The LSC is also a co-financing organisation and uses European Social Funds from the European Union to directly or indirectly part-finance learning activities, helping develop employment by promoting employability, business spirit and equal opportunities, and investing in human resources. Further information about partner organisations and what they do, may be found at [www.lsc.gov.uk/providers/Data/help](http://www.lsc.gov.uk/providers/Data/help) and by following the links to data protection.

At no time will your personal information be passed to organisations for marketing or sales purposes. From time to time students are approached to take part in surveys by mail and phone, which are aimed at enabling the LSC and its partners to monitor performance, improve quality and plan future provision.

Tick this box if you do not wish to be contacted by the LSC or its partners in respect of surveys and research. The LSC values your views on the education or training which you receive, and will use these to help bring about improvements for learners in England.

The LSC or its partners may wish to contact you from time to time about courses, or learning opportunities relevant to you. Please tick here if you do not wish to be contacted about courses or learning opportunities by post.

## How to Pay

If paying by credit/debit card please complete the following declaration:

I authorise you to charge my MASTERCARD/VISA/SWITCH account with the amount of £ \_\_\_\_\_

Card Number:

Expiry Date:  Start Date:  Issue Number:   
(for Switch Cards Only)

Name as it appears on the card (we cannot accept third party payments):  
\_\_\_\_\_

Card Authorisation (please sign): \_\_\_\_\_ DATE: \_\_\_\_\_

Please make sure that:

1. Cheques are made payable to **"SOUTHEND ADULT COMMUNITY COLLEGE"** and are signed and dated
2. Credit card/Switch details are completed in full including the expiry date of your card

# COLLEGE/STUDENT AGREEMENT

## What else can you expect of the College?

### You have the right to expect:

- Professional and committed staff who will support you appropriately throughout the course, and help you to record your progress
- A good learning environment that takes account of your educational needs
- Classes which start and end at the published times and dates
- An environment which respects the rights of all individuals, and which is free from harassment of any kind
- A prompt response to any concerns you bring to our attention.
- A chance to evaluate your course and feed back comments to the College

### We expect you to:

- Identify your needs, set goals and regularly review your progress
- Abide by the regulations of the College, and work with others to create a good learning environment for all
- Participate fully in your chosen course recognising that learning is primarily your responsibility
- Inform your tutor of any difficulties or concerns you may have about the course or the College
- Respect the rights of all individuals to be free from harassment of any kind
- Tell us promptly if you are unable to attend or if your circumstances change
- Undertake any accreditation associated with this course. (Please note that access funding for places in the nursery is conditional upon you undertaking the accreditation. If you do not do so, then you will become liable for the full cost of nursery fees).