

A-1 Technical Training – Learning Agreement / Student Enrolment Form - Session 2013-2014

Student ID

Please use capital letters and tick (✓) where required. Shaded boxes are for office use only. Note new codes are in **bold**.

Personal Details:

STU

1. Title (Mr, Mrs, Miss, Ms):		2. Surname:			
3. Forename(s):			4. Date of Birth:		
5. Previous Name:			6. Gender:	M	F
7. SQA Number			8. Home Address:		
9. Post Code:			10. Day Tel No:		
11. Eve Tel No:			12. Text Phone:		
13. E-Mail:			14. Mobile Phone:		

Next of Kin – Emergency Contact:

15. Name:		
16. Relationship:		17. Telephone No:

Additional Personal Details

18. Ethnic Origin (Please tick box):		10 White Scottish		11 White English		12 White Welsh	
13 White Irish		14 Other White		15 Any Mixed		16 Asian Indian	
18 Asian Bangladeshi		19 Asian Chinese		20 Other Asian		21 Black Caribbean	
23 Other Black		24 Any other		98 Info Refused		99 Info Not Known	
19. Which region or country were you resident in before commencing study at A-1 Technical Training:							
20. Do you have a disability? (Please tick any of the following boxes which apply to you):							
01 No Known Disability		04 Deaf/Hearing impairment		07 Mental health difficulties		10 Disability not listed e.g. autistic spectrum disorder	
02 Dyslexia		05 Wheelchair user/Mobility		08 Diabetes, epilepsy, asthma		97 Info Refused	
03 Blind/Partially Sighted		06 Personal care support		09 Multiple disabilities		98 Info Not Known	
21. Disabled Students Allowance (HNC / HND / Advanced Students only - Please tick the box which applies to you):							
01 I have no disability		02 I have a disability and I receive Disabled Students Allowance					
03 I have a disability -I do not receive Disabled Students Allowance		04 Information on Disabled Students Allowance not sought					
07 Information refused		08 Information not known					
22. If you require any form of support during your course please tick here							

Previous Education Details - What qualifications do you currently hold? (Please complete all of questions 22-28 which apply to you):

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23. I currently have no qualifications		24. The highest qualification I hold is:			
25. No. of Highers (Bands A-C)		26. Number of A Levels (Grades A-E):			
27. No. of SCEs/GCEs/GCSEs @ 1-3 or A-C		28. No. of SCEs/GCEs/GCSEs @ 4-5 or D-E		29. Number of NC Modules:	

Course Details

SCE

30. Course Title:	EXTERNAL PROGRAMME										31. Department:	SP		
32. Course Code:	G	A	Q	E	X	P	R	.	P	33. Year:	1	34. Occurrence:		
35. MOA:	08		36. Student Category:	14	37. Source of Finance	07		38. Fee Status:	1690					
39. Fee Profile:	SP-NFR		40. Location of study											

I verify that the information given is, to my knowledge, correct and I agree to abide by A-1 Technical Training regulations and take account of all official notices. I accept personal responsibility for my timely application for entry to any required external examinations. I accept responsibility for the fees due for this course and recognise that A-1 Technical Training may charge me with debt collection costs if these fees become overdue.

Refund Policy Note : It is not the policy of A-1 Technical Training to refund fees automatically. Refunds may only be considered under certain circumstances and a letter of application is required in all cases. Copies of the policy are available from the Finance Department. Queries should be directed to the Finance Department in the first instance.

Data Protection Act 1998: A-1 Technical Training is registered as a Data Controller and subscribes to the Data Protection Principles as contained in the Data Protection Act 1998. By signing this enrolment form you consent to A-1 Technical Training holding and processing your personal data for all purposes connected with your studies in A-1 Technical Training and with A-1 Technical Training's statutory and business requirements. This will include the submission of personal data to, and receipt of personal data from, Award Bodies, the Scottish Funding Council and other relevant bodies. You have rights under this Act and if you require further information please write to The Director of Finance, A-1 Technical Training, 140 Boyd Street, Crosshill, Glasgow, G42 8TP.

42. Student's Signature:		Date:	
43. Staff Signature:		Date:	

(It is imperative that an appropriate member of staff signs Section 43)

INPUT BY:	
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