

North West Regional College

PART-TIME ENROLMENT FORM



north west
regional college
Derry-Londonderry • Limavady • Strabane

PLEASE COMPLETE AND RETURN ALL 3 PAGES OF THIS FORM

Course Title:

Course Ref: Location:

Start Date: Day: Time:

Day Release: PT Day: PT Evening: Full Fee Payable: Conc Fee Payable:

Office Use Only: AOS Pathway / Session: Student ID:

Personal Details (Please complete ALL details clearly)

Title: Mr Mrs Miss Ms Dr

Surname:

Forename:

Permanent Home Address:

Post Code:

Nationality:

What is your country of birth?

Please write the present name of the country

Unique Learner Number (ULN):

Gender: Male Female

Date of Birth:

Home Phone:

Mobile Phone:

Work Phone:

Email Address:

Residency: EU Non-EU

Learning Support

Office Use Only:
Support letter issued

Please indicate if you have any learning difficulties/disabilities? Yes No

Do you require additional help from us? Yes No

If you have indicated any disability or medical condition which may affect your studies, your details will be passed to the College Learning Support Co-ordinator who will contact you to discuss your learning needs in confidence.

Please state nature of disability & support required:

Safeguarding

Have you ever been convicted of / received a caution for:

- a criminal offence of a violent or sexual nature? Yes No
- an offence relating to the distribution and/or sale of illegal drugs? Yes No

Failing to complete this section or providing misleading or false information may lead to your application/enrolment being withdrawn.
Ticking 'Yes' to any of the questions above will result in a follow up meeting in order to obtain further details.

Where did you hear about the Course? (Please tick where appropriate)

Career Guidance:

- School / Careers Teacher
- DfE Careers Service Adviser
- College Careers Service / Tutor

Web / Digital:

- NIDirect
- College Website
- Social Media (Facebook, Twitter)

Advertising:

- Newspaper Advertisement
- TV Advertisement
- Radio Advertisement
- Billboard / Bus / Bus Shelter Advertisement
- TV / Radio Interview or Newspaper Article

College

- College Information Day
- College Literature / Prospectus

Other:

- Word of Mouth (friend, parent etc)
- Employer
- Jobs and Benefits Office
- Other

Continued...

REDUCED FEES: These apply to the following groups only. **IF YOU QUALIFY FOR REDUCED FEES YOU MUST PROVIDE THE NECESSARY EVIDENCE. FAILURE TO DO SO WILL RESULT IN YOUR ENROLMENT NOT BEING PROCESSED. HOWEVER, IF YOU PAY THE FULL FEE YOUR ENROLMENT WILL BE PROCESSED AND YOU WILL BE PROVIDED WITH A REFUND IF YOU SUBSEQUENTLY PROVIDE THE NECESSARY EVIDENCE.**

Applicants eligible for reduced fees, please tick which applies:

- | | | |
|------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------------------------|
| <input type="radio"/> Full time Further / Higher Education Students | <input type="radio"/> Income Support (or dependent spouse) | <input type="radio"/> Over 60 in receipt of Pension Credit/Rates Relief Scheme |
| <input type="radio"/> Income Based Jobseekers Allowance (or dependent spouse) | <input type="radio"/> Long-term Incapacity Benefit | |
| <input type="radio"/> Working Tax Credit / TC602 (within the qualifying threshold) | <input type="radio"/> Under 19 yrs on 1 July 2017 | |
| | <input type="radio"/> Income Based Employment Support Allowance | |

OFFICE USE ONLY:

Verified & Evidence Attached

Fee Category

Are you Paying: Full Fee Reduced Fee (please attach evidence)

Please state who will be paying your fees: Self Employer Other

Financial assistance may be available to students aged 19 or over enrolled on a vocational course. For more detailed information please visit www.nwrc.ac.uk/faq

Employer / Agency Address:

Post Code:

Tel No. :

Company Stamp and Authorised Signature:

INVOICE DETAILS

**Please have the Company Details and Stamp or Authorised Signature above completed or attach a letter from the organisation stating that they will pay your fees. Your fees are not deemed paid until a responsible organisation provides payment.*

Finance Section (OFFICE USE ONLY)

Payment Method: Cash Cheque Switch Credit Card Invoiced

Cash Transactions:

Amount Paid: Receipt No.: Date: Received By:

Amount Invoiced: Invoiced to: Date: Processed By:

Student Declaration

I certify that the details on this form are correct and that if accepted I wish to be enrolled for the above course and accept that payment of any fees incurred is my responsibility. I understand that I will cease to be a student of the College if I have an absence without explanation for more than four consecutive weeks or if it becomes clear I have provided false statements or have withheld relevant information. In such circumstances, I also understand I will have to apply to be re-admitted as a student. By signing this form I agree to comply with all College regulations, policies and guidelines. Copies of these can be obtained from College Libraries. **Enrolment on a course at this College WILL NOT be processed if the form is not signed by the student.**

Signed **Print Name** **Date**

Data Protection: All personal data will be held in accordance with the Data Protection Act (1998). Some information will be forwarded to: The Department of Employment and Learning and its appointed agents; Awarding Bodies to fulfil statutory obligations; Employers (that allow you time off work to attend courses and pay your enrolment/examination fee) may request information regarding your attendance, progress and results; Careers NI for the purpose of tracking student progression to Further Education and training; the Police Service for Northern Ireland (PSNI) for the detection and prevention of crime; the Learning Records Service for the allocation of your Unique Learner Number (Information available at www.learningrecordsservice.org.uk). At no time will your personal information be passed onto organisations for marketing or sales purposes. Information will be held on the college's computerised system and manual records will be retained for a maximum period of 8 years. For further information please see www.nwrc.ac.uk/policies

OFFICE USE ONLY:

College Signature: **Print Name:** **Date:**

Enrolment/FESR Processed by: **Print Name:** **Date:**

NOTE: You are not enrolled on a course until you have paid the relevant tuition fees. Fees are non-refundable except where a class is cancelled. If the College cancels your chosen course, you will automatically receive a refund. Refunds will be issued in the form of a cheque to the student named on this enrolment form.

North West Regional College EQUALITY MONITORING FORM

Explanatory Note:

The North West Regional College wishes to ensure that its services are accessible to everyone regardless of their gender, age, nationality, race, marital status, religious belief, sexual orientation, political opinion, and whether or not they have a disability or dependents. Whilst the completion of this monitoring form is optional, there is a requirement for data to be collected from students in line with equality legislation in Northern Ireland. The College would appreciate your co-operation in order that it may monitor and evaluate IT services for students.

Please note: This page is strictly private and confidential and will be separated from your form by our Administration Staff

Dependants

Do you have a personal responsibility for the care of?
(tick each box that applies to your circumstances)

Care of Child (Children) Person with disability
Dependant Adult None of the above

Marital Status (please tick one box)

Are you...?

Single Divorced / Dissolved
Married Widowed/Surviving Partner
Separated In a Civil Partnership

Community Background

What religion, religious denomination or body were you brought up in?

Roman Catholic Non-Christian
Protestant No Religion
Other Christian

Ethnic Group

To which of these ethnic groups do you consider you belong to?
(please select the option that is most appropriate for you)

White Bangladeshi
Black Caribbean Chinese
Black African Any Other Ethnic Group
Black other Irish Traveller
Indian Mixed Ethnic Group
Pakistani

Employment Status (please tick where appropriate)

What is your main employment status?

Employed Full Time (30 hours or more per week)
Employed Part-Time (less than 30 hours per week)
Self Employed
Unemployed
Economically Inactive (not in work and not looking for work)

Disability

Are your day to day activities limited because of a health problem or disability which has lasted, or is expected to last at least 12 months?

Yes No

Please state the type of impairment which applies to you. People may experience more than one type of impairment, in which case you may indicate more than one. (please tick all that apply)

Specific learning disability (e.g. dyslexia / dysgraphia)
Blind or Partially sighted
Deaf or hard of hearing
Mobility difficulty
Autistic spectrum disorder / Asperger's syndrome
Mental health condition
Unseen Disability (e.g. diabetes, epilepsy)
Special Need or Medical condition

First Language

What is your main language? OR What is your first language?

English Other

Religious Belief

What religion, religious denomination or body do you belong to?

None Other Christian
Buddhist Hindu
Roman Catholic Jewish
Presbyterian Church in Ireland Muslim
Church of Ireland Sikh
Methodist Other Religion

Political Opinion What is your current political opinion?

Nationalist Prefer not to say
Unionist None
Other

Sexual Orientation

Which of the following options best describes how you think of yourself?

Bisexual Heterosexual / Straight
Gay Prefer not to say
Lesbian

Care Background

Are you in care or have been in care? In care is to mean either fostering, adopted, care home or other supported residential care.

Yes No

Please return to the admissions office suitable for the location of your chosen course:

Derry-Londonderry
Administration Office
North West Regional College
Strand Road, Londonderry
BT48 7AL

Limavady
Administration Office
North West Regional College
Main Street, Limavady
BT49 0EX

Strabane
Administration Office
North West Regional College
Derry Road, Strabane
BT82 8DX

Please attach any additional information you feel will support your application when returning your form.

Alternative formats of this form are available on request.