CVQO Registration Number

**CVQO Enrolment Form**

City and Guilds Professional Recognition Awards (Academic Year 20-21)

[ ] 36 months or more

[ ] 24-35months

[ ] 12-23 months

[ ] 6-11 months

[ ] Less than 6 months

 **If you are not in paid employment and are looking for work or available to start work, for how long have you been unemployed?**

[ ] Are you on an apprenticeship programme?

[ ] Are you in full time education?

1. **Your education and employment status**

 [ ] Courses or learning opportunities[ ] Surveys and Research

[ ] Phone [ ] Email[ ] Text message

1. **Contact with you**

Mobile

Home:

Email:

Write Full Home Address:

Postcode:

Name/ Number of House

Sex: [ ] Male [ ] Female

Date of Birth (dd/mm/yy)

Cadet Unit/ Organisation

1. **Your Personal Details**

OFFICE USE ONLY

**Please complete all sections of this form in Block**

**CAPITALS and BLACK INK (tick where appropriate).**

**Employed**

**Education**

*Insert Text*

VQ *Insert text*:

You can also give consent for other third parties to contact you for other purposes by ticking the following:

We will contact you by post, however our preferred method of contact is by email/text. Please indicate how you wish CVQO to contact you:

[ ] 21 to 30 hours per week

[ ] 11 to 20 hours per week

[ ] 0 to 10 hours per week

[ ] 31+ hours per week

[ ] Not in paid employment, not looking for work and/or not available to start work

[ ] Level 5 Affiliateship in Leadership and Management

[ ] Level 7 Membership in Leadership and Management

[ ] Level 6 Graduateship in Leadership and Management

[ ] Phone [ ] Email[ ] Text message[ ] Post

Please tick all the methods by which they can contact you for these reasons:

*Insert Text*

*Insert Text*

Previous Surname/ Family Name

*Insert Text*

Forename(s)/ Given Name(s)

*Insert Text*

Surname/Family Name

Organisation Code:

 *Insert Text*

[ ] Level 4 Licentiateship in Leadership and Management

1. **Qualification**

*Insert Text*

*Insert Text*

*Insert Text*

*Insert Text*

*Insert Text*

*Insert Text*

**Please provide your Maths and English GCSE grades**

[ ]  Level 4: HNC; NQO 4

[ ]  Level 5: HND; Foundation Degree

[ ]  Level 6: Bachelor’s Degree

[ ] Level 7: Master’s Degree/Doctorate

*Insert Text*

[ ]  Other qualifications (please specify)

[ ] No qualifications

[ ] Entry Level

[ ] Level 1: GCSE/O Level (D-G; <5 grades at A\*-C / 4-9); NQV 1

[ ] Level 2: 5+ GCSE/ O Level A\*- C or 4-9; NVQ 3

[ ] Level 3: 2+ A Levels; 4+ AS Levels; NVQ 3

Any other *Insert Text*

**Are you a British citizen or a national of any other country?**

1. **Nationality and Residency**

[ ] Arab

[ ] Other White background

[ ] Other Asian background

Other ethnic groups

[ ] Gypsy or Irish Traveller

[ ] British

[ ] Other Mixed background

[ ] White and Asian

[ ] Other Black/ African/ Caribbean background

[ ] Caribbean

[ ] African

[ ] Pakistani

[ ] Chinese

[ ] Bangladeshi

White

Mixed/ Mixed ethnic groups

Black/ African/ Caribbean/ Black British

Asian/ Asian British

1. **Ethnic Origin**
2. **Qualifications – highest level achieved**

**Please choose only one from the list below**

1. **Equal Opportunities Information**

 **Does you consider yourself to have a learning difficulty and/or disability and/or health problem? Please tick all that apply.**

[ ] 93 Other physical disability

[ ] 11 Severe learning difficulty

[ ] 4 Visual Impairment

[ ] 94 Other specific learning difficulty (e.g. dyspraxia)

[ ] 17 Speech, language and communication needs

[ ] 16 Temporary disability after illness (e.g. post-viral, accident)

[ ] 15 Asperger syndrome

[ ] 14 Autism spectrum disorder

[ ] 13 Dyscalculia

[ ] 12 Dyslexia

[ ] 10 Moderate learning difficulty

[ ] 9 Mental health difficulty

[ ] 8 Social and emotional difficulties

[ ] 7 Profound complex disabilities

[ ] 6 Disability affecting mobility

[ ] 5 Hearing Impairment

[ ] 95 Other medical condition (e.g. epilepsy, asthma, diabetes

[ ] No disability

[ ] 98 Prefer not to say

[ ] 97 Other disability

[ ] 96 Other learning difficulty

*Insert Text*

Please indicate your main learning difficulty, disability or health problem using the number codes provided above

[ ] Indian

[ ] White and Black Caribbean

[ ] White and Black Asian

[ ] Irish

[ ] I do not wish to give this information

Have you lived in the UK, Channel Islands, Isle of Man or overseas British Forces bases for the last 3 years?

[ ]  I have been living in the UK for the past 3 years

[ ]  Neither of the above

If neither of the above, which country have you been living in for the past 3 years: *Insert Text*

[ ]  I have recently settled in the UK within the last 3 years

**Professional Development**

1. **Our contact details: Please contact the Professional Development Administrator at CVQO if you have any queries**

**Please return this completed form to the Professional Development Administrator at the address below.**

Email: candg@cvqo.org

Phone: 01276 601709

3 Archipelago, Lyon Way,

Camberley, Surrey, GU16 7ER

**Address**

1. **Your learner agreement and declaration**

**Learner Signature**

 *Insert Text*

**Date**

 *Insert Text*

I certify that I have read, understood and agree with the attached learner agreement

**I certify that I have read, understood and agree with the attached learner agreement**