# Skills Bootcamp Enrollment and Registration Document

**Provider:** Prevista Ltd. | **Sponsor:** Surrey County Council | **Website:**[www.prevista.co.uk](http://www.prevista.co.uk)

## Application and Enrollment Form

### Personal Information

|  |  |
| --- | --- |
| Field | Information |
| First Name |  |
| Surname |  |
| National Insurance Number |  |
| Home Postcode |  |
| Email Address |  |
| Phone Number |  |

### Educational Background

|  |  |
| --- | --- |
| Field | Information |
| Highest Level of Education |  |
| Institution Name |  |
| Year of Completion |  |
| Completed level 6 or above? |  |
| If yes, what subject |  |
| Date applied to join skills bootcamp? (mm/yyyy) |  |
| applicants employment status before joining skills bootcamp? |  |

### Employment Status

|  |  |
| --- | --- |
| Field | Information |
| applicant’s employment status before joining skills bootcamp |  |
| if employed, name of Current Employer |  |
| postcode of Current Employer |  |
| applicant Applied through current employer? |  |
| Prior to applying to join skills bootcamp, how many hours worked per week in their job(s)? |  |
| Estimated salary (gbp) |  |
| Hourly/Weekly/monthly/yearly…? |  |
| type of contract? full time/permanent/Temp/part-time/zero hour |  |
| applicant going to continue working while on the skills bootcamp? |  |
| applicant main work prior to joining the skills bootcamp? |  |
| if currently unemployed, what is the most recent work? job title |  |
| what is the industry of main work or most recent work? |  |
| is the applicant currently claiming universal credit? |  |
| does applicant have children or adults caring responsibilities? |  |
| applicant’s date of birth |  |
| applicant’s gender |  |
| does applicant have disabilities or long term health condition? |  |
| applicant’s ethnicity |  |

### Emergency Contact

|  |  |
| --- | --- |
| **Field** | **Information** |
| Full Name |  |
| Relationship |  |
| Phone Number |  |
| Email Address |  |

### Additional Information

|  |  |
| --- | --- |
| Question | Answer |
| does applicant have children or adults caring responsibilities? | Yes [ ] / No [ ] |
| applicant’s date of birth | Yes [ ] / No [ ] |
| applicant’s gender | Yes [ ] / No [ ] |
| does applicant have disabilities or LONG-TERM health condition? | Yes [ ] / No [ ] |
| applicant’s ethnicity | Yes [ ] / No [ ] |
| please confirm all applicants have received all the necessary supporting materials on how their data will be used. this is necessary to provide the training. necessary supporting documents include: (1) Privacy notice and q&a (2) Complaints procedure | Yes [ ] / No [ ] |
| all applicants or learners may be asked to take part in a qualitative interview and/or surveys to understand their experience of participating in bootcamps (this is optional). has the applicant/learner opted out of being contacted for this purpose? | Yes [ ] / No [ ] |
| where did the applicant hear about this course? | Yes [ ] / No [ ] |
| has the applicant become a participant? | Yes [ ] / No [ ] |
| planned start date? | Yes [ ] / No [ ] |
| if applicant did not become a participant, please select the reason why? | Yes [ ] / No [ ] |

### Statement of Interest

* Please explain why you are interested in the Skills Bootcamp and how you think it will benefit you (200 words):

## CEIAG (Careers Education, Information, Advice, and Guidance)

|  |  |
| --- | --- |
| Field | Information |
| Career Goals |  |
| Preferred Industry |  |
| Support Needed | (e.g., resume writing, interview skills) |

## Eligibility Criteria

### Eligibility Requirements:

1. **Age:** Applicants must be 19 years or older.
2. **Employment Status:** Applicants must be unemployed at the time of enrollment.
3. **Residency:** Applicants must be residents of Surrey.
4. **Education:** Applicants must have at least a basic level of literacy and numeracy.
5. **Commitment:** Applicants must be able to commit to the full duration of the bootcamp (12 weeks, 3 days per week).

## Supporting Documents:

|  |  |
| --- | --- |
| Document | Check (⎫) |
| Proof of Age (e.g., passport, driving license) | [ ] |
| Proof of Residency (e.g., utility bill, council tax statement) | [ ] |
| Proof of Unemployment (e.g., benefit statement, letter from Jobcentre) | [ ] |
| Educational Certificates (if applicable) | [ ] |

## Enrolment Agreement

### Course Details

|  |  |
| --- | --- |
| Field | Information |
| Course Name | Skills Bootcamp in Health and Social Care |
| Duration | 12 weeks (3 days per week) |
| Start Date |  |
| End Date |  |
| Location |  |

## Terms and Conditions

### Commitment:

* + The participant agrees to attend all scheduled sessions and actively participate in all course activities.
  + The participant agrees to complete all assignments and assessments as required.

### Code of Conduct:

* + The participant agrees to adhere to the Skills Bootcamp code of conduct, which includes respectful behavior towards peers and instructors, punctuality, and adherence to health and safety regulations.

### Support Services:

* + The participant is entitled to access all support services provided by the Skills Bootcamp, including career advice, counseling, and additional learning support.

### Privacy and Data Protection:

* + The participant agrees to the collection and use of their personal data in accordance with Prevista Ltd's Privacy Notice and the data sharing policies of Surrey County Council.

### Consent:

* + The participant consents to being filmed for course development, evaluation, and marketing purposes.
  + The participant consents to data sharing with Surrey County Council.

### Evaluation and Feedback:

* + The participant may be contacted for surveys or interviews as part of the program's evaluation.

### Termination:

* + Prevista Ltd. reserves the right to terminate this agreement if the participant fails to comply with the terms and conditions outlined in this agreement.

## Declaration and Consent

I confirm that the information provided in this form is accurate and complete to the best of my knowledge. I consent to the collection and use of my personal data in accordance with Prevista Ltd's Privacy Notice and the data sharing policies of Surrey County Council. I also consent to being filmed for course development, evaluation, and marketing purposes.

|  |  |
| --- | --- |
| Signature Field | Details |
| Participant Signature: |  |
| Date: |  |
| Provider Representative Signature: |  |
| Date: |  |