

UKPRN

--	--	--	--	--	--	--

ULN

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Provider number
(UPIN)

--	--	--	--	--	--	--

Learner reference
number

--	--	--	--	--	--	--	--	--	--	--	--	--	--

The Provider should X
this box if this is a
change notification

 Box A

Single Individualised Learner Record 2011/12 – Generic Learner Information Data Capture Form

Learner Information – Please complete in BLOCK CAPITALS using Black Ink

Family name

--	--	--	--	--	--	--	--

Given names

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of birth

--	--	--	--	--	--	--	--	--	--	--	--	--	--

1 9

Current address
lines 1 & 2

--	--	--	--	--	--	--	--	--	--	--	--	--	--

House No. / Name & Street

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Country of
domicile

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Not required for ESF funded learning

Current address
lines 3 & 4

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Town / City

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Telephone
number

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Current
postcode

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Postcode prior to
enrolment

--	--	--	--	--	--	--	--	--	--	--	--	--	--

National insurance
number

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Email address

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Sex
(M or F)

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Ethnicity

--	--	--	--	--	--	--	--	--	--	--	--	--	--

Prior attainment

--	--	--	--	--	--	--	--	--	--	--	--	--	--

LLDD & Health Problems and Learner Funding and Monitoring – Only complete and return where applicable

Do you consider yourself to have a long term disability, health problem or any learning difficulties? (Y/N)

--	--	--	--	--	--	--	--	--	--	--	--	--	--

LLDD & health problem
type and code

D	S												
---	---	--	--	--	--	--	--	--	--	--	--	--	--

And / Or

L	D												
---	---	--	--	--	--	--	--	--	--	--	--	--	--

Learner FAM type and identifier(s) (LSR type is not required for ESF funded learning)

L	S	R											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

L	S	R											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

L	S	R											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

L	S	R											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

N	L	M											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

N	L	M											
---	---	---	--	--	--	--	--	--	--	--	--	--	--

Declaration

How We Use Your Personal Information

The personal information you provide is passed to the Chief Executive of Skills Funding ("the Agency") and, when needed, the Young People's Learning Agency for England ("the YPLA") to meet legal duties under the Apprenticeships, Skills, Children and Learning Act 2009, and for the Agency's Learning Records Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for purposes relating to education or training. Further information about use of and access to your personal data, and details of partner organisations are available at:

<http://skillsfundingagency.bis.gov.uk/privacy.htm>
<http://www.ypla.gov.uk/privacy.htm>
<http://www.learningrecordsservice.org.uk/documentlibrary/documents/Code+of+Practice+for+Sharing+of+Personal+Information.htm>

Tick any of the following boxes if you do not wish to be contacted:

About courses or learning opportunities For surveys and research By post By phone By e-mail

This activity is part-financed by the European Union through the European Social Fund (ESF). ESF supports activities to extend employment opportunities and develop a skilled workforce.

Learner's Signature _____

Date / / 20

I certify that the information contained on this form is correct

Learner verification type (LRS registration use only)

Relationship with school Passport Driving licence ID Card/Other national ID NI card Certificate of entitlement Bank card/Debit card Other None provided 

**European Union
European Social Fund**
Investing in jobs and skills

Learner's names

Learner reference number

Page ____ of ____
The Provider should X
this box if this is a
change notification

Box A

Single Individualised Learner Record 2011/12 – Generic Learner Information Data Capture Form – Employment and Monitoring Information

Employment Status – This information is mandatory for all Apprenticeships and Other ER funded learning

First Day of Learning

Employment status

Date status applies to / / 20

Employer ID

Workplace Location Postcode

Employment status monitoring type and codes

E	I	I	
---	---	---	--

R	F	U	
---	---	---	--

B	S	I	
---	---	---	--

Current Employment Status

Complete as many times as necessary if the learners' current employment status changes throughout their learning

Employment Status

Date status applies to / / 20

Employer ID

Workplace Location Postcode

Employment Status Monitoring Type and Codes

E	I	I	
---	---	---	--

R	F	U	
---	---	---	--

B	S	I	
---	---	---	--

Employment Status

Date status applies to / / 20

Employer ID

Workplace Location Postcode

Employment Status Monitoring Type and Codes

E	I	I	
---	---	---	--

R	F	U	
---	---	---	--

B	S	I	
---	---	---	--

Employment Status

Date status applies to / / 20

Employer ID

Workplace Location Postcode

Employment Status Monitoring Type and Codes

E	I	I	
---	---	---	--

R	F	U	
---	---	---	--

B	S	I	
---	---	---	--

Employment Status

Date status applies to / / 20

Employer ID

Workplace Location Postcode

Employment Status Monitoring Type and Codes

E	I	I	
---	---	---	--

R	F	U	
---	---	---	--

B	S	I	
---	---	---	--

Employment Status

Date status applies to / / 20

Employer ID

Workplace Location Postcode

Employment Status Monitoring Type and Codes

E	I	I	
---	---	---	--

R	F	U	
---	---	---	--

B	S	I	
---	---	---	--

Provider Specified Learner Monitoring Information

Provider Specified Learner Monitoring

Destination Information

Destination

Use code 95 in
Destination and update
when a learner
completes all learning.

Learner's names

Learner reference number

Page ___ of ___
 The Provider should X
 this box if this is a
 change notification

Box A

Single Individualised Learner Record 2011/12 – Apprenticeship Programme Aims ONLY

Learning Start Information

Aim type	1	Learning aim reference	Z P R O G 0 0 1	Learning start date	/ / 20	Learning planned end date	/ / 20		
Funding model	4 5	Contracting organisation code	S F	Programme type		Framework code		Programme entry route	
Delivery location postcode				Planned group based hours				Planned one to one contact hours	

Learning Delivery Funding and Monitoring (FAM) Information – Only complete and return where applicable

Learning delivery funding and monitoring type(s) and code(s)

S O F	1 0 5	S O F		N S A		E E F		L D M		L D M	
S S P	S S	C V E	C V	S P P	S P	You should complete only one SPP, SSP or CVE code and not all three, if applicable.					

Provider Specified Learning Delivery Monitoring Information

Provider specified learning delivery monitoring fields

Learning End Information

Learning actual end date	/ / 20	Completion status	<input type="checkbox"/>	Withdrawal reason Required if Completion status = 3		Outcome indicator	<input type="checkbox"/>
Achievement date Required if Outcome is achieved	/ / 20			Actual progression route			
Provider's Signature			Date	/ / 20			

Learner's names

Learner reference number

Page ____ of ____
The Provider should X
this box if this is a
change notification
Box A

Single Individualised Learner Record 2011/12 – Apprenticeship Component Aims ONLY

Learning Start Information

Aim type	<input type="text"/>	Learning aim reference	<input type="text"/>	Learning start date	<input type="text"/> / <input type="text"/> / 20	Learning planned end date	<input type="text"/> / <input type="text"/> / 20		
Funding model	<input type="text"/>	Programme type	<input type="text"/>	Framework code	<input type="text"/>	Proportion of funding remaining	<input type="text"/>	Main delivery method	<input type="text"/>
Programme type and Framework code should be the same as the Programme Aim entry values									
Delivery location postcode	<input type="text"/>	Subcontracted or partnership UKPRN	<input type="text"/>	Planned credit value <small>Only required for learning aims in QCF unit trials</small>					<input type="text"/>

ESF Funded Apprenticeship Component Aim – Additional Information

Project dossier number	<input type="text"/>	L	<input type="text"/>	Local project number	<input type="text"/>
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Learning Delivery Funding and Monitoring (FAM) Information – Only complete and return where applicable

Learning delivery funding and monitoring type(s) and code(s)

F	F	I	<input type="text"/>	A	L	N	<input type="text"/>	A	S	N	<input type="text"/>
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Employment Status – To be completed with the learner

Day Before Starting Learning Aim

Employment status	<input type="text"/>	Date status applies to	<input type="text"/> / <input type="text"/> / 20	Employment status monitoring type and codes	<input type="text"/> L	O	U	<input type="text"/>	<input type="text"/> B	S	I	<input type="text"/>
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Provider Specified Learning Delivery Monitoring Information

Provider specified learning delivery monitoring fields	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>

Learning End Information

Learning actual end date	<input type="text"/> / <input type="text"/> / 20	Completion status	<input type="checkbox"/>	Withdrawal reason	<input type="text"/>	Outcome indicator	<input type="checkbox"/>	Achievement date	<input type="text"/> / <input type="text"/> / 20
				Required if Completion status = 3		Required if Outcome is achieved			
Outcome grade	<input type="text"/>			Credits achieved <small>Only required for learning aims in QCF unit trials</small>			<input type="text"/>		

Provider's Signature _____

Date / / 20