

UKPRN Previous UKPRN ULN Learner reference number Previous Learner Reference Number **Individualised Learner Record 2023-24 - Learner Details Data Capture Form****Learner Information - Please complete in BLOCK CAPITALS using Black Ink**

Family Name	<input type="text"/>	Given Names	<input type="text"/>	Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address line 1	<input type="text"/>	Address line 2	<input type="text"/>	Sex (M/F)	<input type="text"/>	Ethnicity	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address line 3	<input type="text"/>	Address line 4	<input type="text"/>	Telephone number	<input type="text"/>				
Current postcode	<input type="text"/>	Postcode prior to enrolment	<input type="text"/>	National insurance number	<input type="text"/>				
Email address	<input type="text"/>			Campus ID	<input type="text"/>				

Learner is not to be contacted, for example where a learner has suffered severe illness during the programme or other circumstance RUI 4 Learner is not to be contacted - learner has died RUI 5 **LLDD and Health Problem 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	<input type="text"/>	LLDD Cat	<input type="text"/>	Primary LLDD	<input type="text"/>
Does the learner have any of the following (tick those that apply)		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
High Needs Student (HNS)	<input type="text"/>	Education Health Care Plan (EHC)	<input type="text"/>	Disabled Student Allowance (DLA)	<input type="text"/>
Learner Support Reason (LSR)	<input type="text"/>	<input type="text"/>	<input type="text"/>	Special Educational Needs (SEN)	<input type="text"/>
National Learner Monitoring (NLM)	<input type="text"/>	<input type="text"/>	Eligibility for Disadvantage Funding (EDF)	<input type="text"/>	<input type="text"/>
Maths Condition of Funding (MCF)	<input type="text"/>	English Condition of Funding (ECF)	<input type="text"/>	Free Meal Eligibility (FME)	<input type="text"/>
Is learner living in accommodation provided by the provider	<input type="text"/>	Additional learner support cost	<input type="text"/>	Planned learning hours	<input type="text"/>
Planned employability, enrichment and pastoral hours	<input type="text"/>	Maths Grade	<input type="text"/>	English Grade	<input type="text"/>

How we use your personal information

The ILR collects data about learners and learning undertaken. Publicly funded colleges, training organisations, local authorities, and employers (FE providers) must collect and return the data to the ESFA each year under the terms of a funding agreement, contract or grant agreement.

It helps ensure that public money distributed through the ESFA is being spent in line with government targets. It is also used for education, training, employment, and well-being purposes, including research.

ILR data is shared with third parties where it complies with DfE data sharing procedures and where the law allows it. The DfE and the English European Social Fund (ESF) Managing Authority (or agents acting on their behalf) may contact learners to carry out research and evaluation to inform the effectiveness of training.

<https://guidance.submit-learner-data.service.gov.uk/23-24/ilr/ilrprivacynotice>

Learner verification**type (LRS registration use only)**

Relationship with school	<input type="text"/>	Passport	<input type="text"/>	Driving license	<input type="text"/>	ID Card/ Other national ID	<input type="text"/>	NI Card	<input type="text"/>	Certificate of entitlement	<input type="text"/>	Bank card/ debit card	<input type="text"/>	Other	<input type="text"/>	None	<input type="text"/>
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Learner's Signature

I certify that the information contained on this form is correct

Date

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 reference number

[illegible]

Individualised Learner Record 2023-24 - Data Capture Form - Employment and Monitoring Information

Employment Status ☐ ☐ Date employment status applies ☐ ☐ EDRS ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ OET ☐ ☐ ☐

Employment Status Monitoring type and code

S E I

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 E I I

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 L O U

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 L O E

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 B S I

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 P E I

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 S E M

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Employment Status		Date employment status applies		EDRS							OET			
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Employment Status Monitoring type and code

S E I

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Employment Status		Date employment status applies		EDRS							OET			
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Employment Status Monitoring type and code

S E I

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Employment Status		Date employment status applies		EDRS							OET			
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Employment Status Monitoring type and code

S E I

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Individualised Learner Record 2023-24 - Data Capture Form - Provider Specified Monitoring Information

Provider Specified Learner Monitoring - A

Provider Specified Learner Monitoring - B



Learner's names

Learner reference number

Partner UKPRN

Individualised Learner Record 2023-24 - Data Capture Form - Learning Aim Information

Aim Type	<input type="checkbox"/>	Aim sequence number	<input type="checkbox"/>	Learning aim reference	<input type="checkbox"/>	Funding Model	<input type="checkbox"/>	Standard code	<input type="checkbox"/>
Learning Start Date	<input type="checkbox"/>	Original learning start date	<input type="checkbox"/>	Learning planned end date	<input type="checkbox"/>				
Planned hours	<input type="checkbox"/>	OTJ Hours	<input type="checkbox"/>	Programme type	<input type="checkbox"/>	Framework code	<input type="checkbox"/>	Pathway code	<input type="checkbox"/>
Delivery location postcode	<input type="checkbox"/>	Learning start date postcode	<input type="checkbox"/>	Additional delivery hours	<input type="checkbox"/>				
Funding adjustment for prior learning	<input type="checkbox"/>	Other funding adjustment	<input type="checkbox"/>	Contract reference number	<input type="checkbox"/>				
End-point assessment org	<input type="checkbox"/>	Completion status	<input type="checkbox"/>	Learning actual end date	<input type="checkbox"/>	Withdraw reason	<input type="checkbox"/>		
Achivement date	<input type="checkbox"/>	Outcome grade	<input type="checkbox"/>	Software supplier aim identifier	<input type="checkbox"/>				
Delivery location postcode	<input type="checkbox"/>	Employment outcome	<input type="checkbox"/>	Outcome	<input type="checkbox"/>				

Individualised Learner Record 2023-24 - Data Capture Form - Learning Delivery Funding and Monitoring

S O F	<input type="checkbox"/>	F F I	<input type="checkbox"/>	E E F	<input type="checkbox"/>	R E S	<input type="checkbox"/>	A D L	<input type="checkbox"/>	A L B	<input type="checkbox"/>	A S L	<input type="checkbox"/>	F L N	<input type="checkbox"/>
L S F	<input type="checkbox"/>	Date from	<input type="checkbox"/>	Date to	<input type="checkbox"/>										
A C T	<input type="checkbox"/>	Date from	<input type="checkbox"/>	Date to	<input type="checkbox"/>							D A M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L D M	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Individualised Learner Record 2023-24 - Data Capture Form - Provider Specified Monitoring Information

Provider Specified Delivery Monitoring - A

Provider Specified Learner Monitoring - B

Provider Specified Delivery Monitoring - C

Provider Specified Learner Monitoring - D

Individualised Learner Record 2023-24 - Data Capture Form - Financial Details and Workplace Details

Financial Type	<input type="checkbox"/>	Financial Code	<input type="checkbox"/>	Financial Amount	<input type="checkbox"/>	Financial Date	<input type="checkbox"/>
Financial Type	<input type="checkbox"/>	Financial Code	<input type="checkbox"/>	Financial Amount	<input type="checkbox"/>	Financial Date	<input type="checkbox"/>
Financial Type	<input type="checkbox"/>	Financial Code	<input type="checkbox"/>	Financial Amount	<input type="checkbox"/>	Financial Date	<input type="checkbox"/>
Financial Type	<input type="checkbox"/>	Financial Code	<input type="checkbox"/>	Financial Amount	<input type="checkbox"/>	Financial Date	<input type="checkbox"/>
WP Start Date	<input type="checkbox"/>	End Date	<input type="checkbox"/>	Hours	<input type="checkbox"/>	Mode	<input type="checkbox"/>
WP Start Date	<input type="checkbox"/>	End Date	<input type="checkbox"/>	Hours	<input type="checkbox"/>	Empld	<input type="checkbox"/>

Provider Signature _____

Date ☐