

ESF Registration Form

National Third Sector Fund

(N.B. Must be completed for all NTSF participants including EF and other match funded participants)

(Please note that all information included in this form must match the ESF Recipient Data Spreadsheet. Any change must follow the issued guidance.)

1 - Project Details:

Delivery Organisation:

Project Name:	X GMP	Employability Pipeline Stage:	
Date of Registration:	20 / 07 / 2019	Start Date:	20 / 07 / 2019
Referring Agency: (if applicable)	Ms		

2- Participant Details:

Participant Number:

(as per the ESF Recipient Data Spreadsheet)

Forename:	Winnie	Surname:	Robertson
Date of Birth: (Evidence required)	13 / 12 / 1991	Age at registration:	27
Address: (Evidence must be dated within 6 months of registration)	Flat 1A, 19 Prospecthill Crescent 19 Prospecthill Crescent GLASGOW		
Postcode:	G42 0JJ	Home Tel No:	0
Mobile No:	01415627265	Email:	I
Current Nationality:	Toonite	Place/ Country of Birth:	United Kingdom

Are you legally able to reside and work in the UK?

(Evidence required)

Yes

National Insurance No:

(SCN can be provided but NIN must be requested and updated in next claim)

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Are you in Receipt of State Benefits?

Yes ☐

No ☒

3 - Details of Benefits:		Please Tick	Evidence Collected (Refer to ESF Participant Guidance)
Not in receipt of Benefits		X	
Job Seekers Allowance			
Education maintenance allowance (if yes, confirm if in full/part time education)			
Carers Allowance			
Income support			
Incapacity Benefit/Employment and Support Allowance (ESA) (if yes specify below)			
ESA - Work Related Activity Group (yes / no) – select applicable			
Housing Benefit			
Working tax credit			
Council tax benefit			
Disability living allowance/Personal Independence Payment			
Child tax credit			
Child benefit			
Childcare element of Work Tax Credit			
Universal Credit (please ensure all elements of UC are clearly detailed)			
Other please specify			
4 - Employment status:			
	Unemployed	Economically Inactive	Inactive, not in Education/Training
0 – 6 Months			
7 – 12 Months			X
Over 12 Months			
		(Please tick)	Evidence Collected (Refer to ESF Participant Guidance p. 22-24)
Unemployed (Individuals in receipt of JSA irrespective of the length of unemployment <u>or</u> Individuals in the ESA Work related Activity Group)			
Long Term Unemployed (Individuals in receipt of JSA irrespective of the length of unemployment <u>or</u> Individuals in the ESA Work related Activity Group). But for more than: <i>6 months continuous unemployment (under 25) or 12 months continuous unemployment (over 25)</i>			
Economically Inactive Individuals who are not employed or registered unemployed eg Pre-NEET participants			
Inactive, not in education or training Individuals who are inactive (see above) who are not in education or training.		X	

(Evidence Required)

If inactive and not in receipt of benefits, please provide a description of the participant circumstances as part of a more detailed assessment.

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5 - Barriers to Employment (Tick all that apply)	TICK TO INDICATE YES	Evidence collected (at least for 2 barriers unless Long Term Unemployed applies). (Refer to ESF Participant Guidance p. 23-40)
Long Term Unemployed		
Living in Jobless Household		
Living in a Jobless household with dependent children		
Living in a single adult household with dependent children	X	
Disability (must be registered disabled)		
Migrant, people with a foreign background, minorities (including marginalised communities such as Roma)		
Homeless or affected by housing exclusion		
Asylum Seeker		
Refugee		
Primary carer of older person		
Primary carer of child/children (under 18) or adult		
Looked after young person		
Criminal convictions		
Long term physical illness/condition	X	
Mental Health issues		
No or limited work experience		
Substance related conditions		
Low skilled		
Armed Forces Veteran		
Above 54 years of age		
From Rural Area		
From Remote Rural Area		
From Employment Deprived Area		
At risk of becoming NEET		

Material Deprivation- Individuals living in a household who lack at least 3 of the following:

1. To face unexpected expenses		
2. 1 week annual holiday away from home		
3. To pay for arrears		
4. A meal with meat every 2 nd day		
5. To keep home adequately warm		
6. To have a washing machine		
7. To have a colour TV		
8. To have a telephone		
9. To have a personal car		

Detailed assessment of participant circumstances and why these are barriers to employment:

Eligibility Criteria 1:

Barrier name:

Eligibility Criteria 2:

Barrier name:

IF MORE SPACE IS REQUIRED PLEASE PROVIDE ON A SEPARATE SHEET

6 - Qualification Level Highest Level of the ISCED - (ESF Participant Guidance p.16-17)			
ISCED Level 1		ISCED Level 2	
ISCED Level 3		ISCED Level 4	
ISCED Level 5	X	ISCED Level 6	
ISCED Level 7		ISCED Level 8	

7 - Supporting Evidence Checklist (as per the ESF Participant Guidance)	
	Evidence Submitted
DOB	Driving licence
Right to Live and Work in the UK	Passport
Address	Letter from Local Authority
Employment Status	Pipeline form
Barrier to Employment	JCP referral form
Benefits	Pipeline form
Other Supporting Evidence	I
Action Plan	Action plan completed
Notes:	

8 - Equalities Monitoring Information				
<p>One of the European Social Fund's aims is to increase equality of opportunity for its participants, in line with equality legislation and policy aims.</p> <p>To do so, it is important to understand how our participants describe their Gender and if they would describe themselves as having a Disability. This information does not impact your participant on the course – it is only for anonymous reporting purposes.</p>				
Gender	Male	<input checked="" type="checkbox"/>	Female	<input type="checkbox"/>
Citizenship Status:				
EU Citizen <input type="checkbox"/>	UK Visa Holder <input type="checkbox"/>	Asylum Seeker <input checked="" type="checkbox"/>	Refugee <input type="checkbox"/>	Other <input type="checkbox"/>
Do you consider yourself disabled?		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Are you registered disabled?		Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	

Participant:


I am aware that I am receiving support from the European Social Fund and declare that the information in this form is correct to the best of my knowledge.

Signature:  Date: _____

Key Worker:

The information in this form is correct to the best of my knowledge and copies of supporting evidence have been made and retained as per ESF Participant Guidance

Signature:  Date: _____

Skills Development Scotland - Information Exchange and Co-operation Statement											
<p>Before agreeing to participate and signing below, please take your time to read this section carefully. This sets out the reasons why we require your personal information, how long we will store it for and who we are required to share it with.</p> <p>It is necessary for information about training, eligibility (including Financial Claims) and where participants find themselves after the programme ("Relevant Information") to be passed to SDS to monitor, audit and evaluate the National Third Sector Fund. This is legally justified under Data Protection legislation as we require your personal information to perform a task in the public interest – as we must verify that the funding made available to us for the NTSF programme is going to the individuals that is intended to support. Ensuring the appropriate spending of public funds, preventing fraud and assessing the long-term impact of the programme is a justifiable public aim.</p> <p>The National Third Sector Fund receive funding through the European Social Fund (ESF). ESF policy requires to receive information on participants gender. The promotion of gender equality and equal opportunities is a fundamental priority of ESF.</p> <p>In addition, for the purposes of monitoring Delivery Organisation Compliance and quality assurance and to assist with policy development, SDS, or its nominated agents, may wish to contact participants by post, e-mail or telephone or meet directly to discuss the support, training and outcomes facilitated under the National Third Sector Fund. Again, this is for us to perform a task in the public interest – ensuring that public funds are appropriately used and that the programme is operating to a high standard.</p> <p>We will only keep your personal information for as long as is necessary for the above purposes. For further information on exact dates of how long this will be, and for information about your rights as an individual in regards to your personal data, please see the privacy notice for NTSF on our website: www.skillsdevelopmentscotland.co.uk/about/policies/privacy or alternatively, request a hard copy from us at esigovernance@sds.co.uk</p> <p>As part of this monitoring and evaluation, we may request participating individuals to complete questionnaires issued by or on behalf of SDS and/or Scottish Ministers. Your participation in any such discussion or survey is entirely optional – and if you'd like to be contacted, you can choose the method you'd prefer to be contacted in below.</p> <table border="0"> <tr> <td>Email</td> <td>Post</td> <td>Telephone (mobile)</td> <td>Telephone (home)</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>				Email	Post	Telephone (mobile)	Telephone (home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email	Post	Telephone (mobile)	Telephone (home)								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
<p>By agreeing to participate in the National Third Sector Fund, I confirm that I have read and understand the contents of this section and hereby acknowledge and understand –</p> <ul style="list-style-type: none"> a) That the personal information I have entered into this form is required to be passed to public authorities concerned with economic and/or skills development (including SDS, Local Authorities, Scottish Ministers, the European Commission and/or government departments); and/or awarding bodies for vocational & employability qualifications; b) That I undertake to co-operate fully with SDS (and/or SDS's agents, as applicable including contracted Delivery Organisation) in response to any reasonable request for information concerning my participation in the National Third Sector Fund, to enable SDS to monitor Delivery Organisation compliance and quality assurance and to assist with policy development. c) That SDS or the public authorities listed in section (a) above may contact me either directly or through duly authorised agents to assist them in the monitoring and/or auditing of the National Third Sector Fund. 											
Participant Signature		Date									

Glasgow Momentum Programme Initial Action Plan

Name:

Date:

Long Term Goals

From the initial assessments and from discussion with my key worker I have chosen to develop the areas outlined below.

Specific
Measureable
Achievable
Relevant
Time-related

Short Term Goals

My first goals/actions on the road to developing these areas are:

Actions

I will do this by:

This Action Plan has been negotiated between:

Staff Signature: _____

Service User Signature: _____

Date: