

CONFIRMATION/CHANGE OF LEARNER DETAILS

CDMS

[Reset Form](#)

ORIGINAL DETAILS (*Compulsory information) Learner No:

*Name:

*House Name/Flat No:

*Address:

*Postcode:

*Date of Birth:

Tel No:

NEW DETAILS (*Compulsory information)

*Name:

*House Name/Flat No:

*Address:

*Postcode:

Tel No:

EMPLOYMENT STATUS (Please tick appropriate number)

- | | | | |
|----------------------------------|--------------------------|--------------------------------------|--------------------------|
| 1. Employed (16 hours and under) | <input type="checkbox"/> | 7. Not working (more than 36 months) | <input type="checkbox"/> |
| 2. Employed (17 hours and over) | <input type="checkbox"/> | 8. Incapacity/Sickness | <input type="checkbox"/> |
| 3. Not working (up to 6 months) | <input type="checkbox"/> | 9. Retired | <input type="checkbox"/> |
| 4. Not working (7-12 months) | <input type="checkbox"/> | 10. Student | <input type="checkbox"/> |
| 5. Not working (13-24 months) | <input type="checkbox"/> | 11. Training Scheme | <input type="checkbox"/> |
| 6. Not working (25-36 months) | <input type="checkbox"/> | 12. Not Stated | <input type="checkbox"/> |

CITIZENSHIP (Please tick ONE number only)

- | | | | |
|------------------|--------------------------|-----------------|--------------------------|
| 1 EU Citizen | <input type="checkbox"/> | 3 Asylum Seeker | <input type="checkbox"/> |
| 2 UK Visa Holder | <input type="checkbox"/> | 4 Refugee | <input type="checkbox"/> |

RELIGION

(Please tick one)

Not Stated None Church of Scotland Roman Catholic Other Christian Buddhist Hindu Muslim Jewish Sikh Other **DISABILITY**

(Please tick one)

None Physical or Motor
Impairment Mental Health Issue Learning Disability Hearing Impairment
- Partial Hearing Impairment
- Total Visual Impairment
- Partial Visual Impairment
- Total Communication
Difficulties Multiple Disabilities Other Chronic Illness
or Disability **QUALIFICATIONS**

(Please tick HIGHEST qualification only)

No qualifications Qualifications below S/NVQ1/
General Standard Grade equivalent S/NVQ1/General Standard
Grade or equivalent S/NVQ2/Credit Standard Grade or
equivalent S/NVQ3/Higher Grade or
equivalent Advanced Higher/HNC or
equivalent S/NVQ4/HND or equivalent Ordinary or Honours Degree S/NVQ5, Post-graduate or above City & Guilds Other (Please specify) **MOTIVATION****Why are you interested in attending this provision?** (please tick one only)Personal Work Family Community **CONSENT FOR USE OF PHOTOGRAPHS/WORK**

From time to time Leisure and Communities Department would like to take some photographs of the activities/events which you have been involved with as a record of our work or to include in promotional material, displays etc. We may also wish to display some of your work.

If you agree to your photograph being used please tick.

If you agree to your work being used please tick.