Qualification Fund Application

Name of Organisation	
Address of organisation	
Name of Contact	
Telephone Number	
Email Address:	
<u>UKPRN</u> :	Please note that your organisation must be a registered learning provider. You can register at: <u>UK Register of Learning Providers</u>

Important notes:

- This application form is for Qualification funded courses.
- You will need to enrol a minimum of 12 learners in order to start any course (up to a maximum of 16).
- All community/voluntary providers will have to provide a copy of their end of year financial records, to ensure financial probity as demanded by the Skills Funding Agency.
- Bids funded may be delivered as part of a mixed level offer across hubs including: Northolt, Southall, West Ealing and Acton.
- All courses are qualification based please do not specify a level (unless it's a progression course) as learners will be required to sit an assessment prior to the start of the course.
- 45 guided learning hours for functional skills courses; From 60-120 hours for ESOL;12 hours employability. Contact EAL for further guidance 0208 825 5577 or email:adultlearning@ealing.gov.uk
- If this application is successful, each organisation will automatically join the Community Learning Development Group (CLDG), and will meet two times each academic year.
- Further conditions are to be found in the Service Level Agreement that will be drawn up.

Course Title			Timetable Details								
			Start	date	End date	Day	Start and	End time	No of sessi ons	GLH Guided Learning Hours	Tutor
1.											
2.											
Note: Tuto courses. T	g your own Tutor/s ple or/s will need to provide to EAL the hey will also need to attend a tuto documents whilst delivering the Co	eir CV, Conta or training sea	ict details wit sion so that	th addres they are	s, Copy of their of familiar with EAL	policies/pr	ocedures a	and on how to cor	nplete the r	elevant Evidend	ce of
	me of tutor 1		anning i unu.	TULOIS W					year for qu	any assurance.	
Highest held											
Adult Group-Teaching Experience in the UK and No. of years											
Current Enhanced CRB/DBSplease tick (✓)Yes		Yes	No	CRB/DBS Number: Date of issue:							
Safeguarding Certificate Yes		Yes	No	Date of issue:							
Prevent Training Yes		Yes	No	Date:							
Full Name of tutor 2		1									
Highest held	t teaching qualification										
	roup-Teaching ence in the UK and /ears										
	Enhanced	Yes	No	CRB/	OBS Number:						
CRB/DE	3S …please tick (✓)			Date o	of issue:						
Safegua	arding Certificate	Yes	No	Date of	of issue:						
Prevent	t Training	Yes	No	Date:							

Who are your courses aimed at and what is their purpose? Please tick (✓) target groups							
Priority groups	Please indicate number		Priority	groups	Please indicate number		
Male			Economic	cally Inactive			
ESOL			Below Le	vel 2 Qualification			
Disability			Business	start - up			
Physical/Mental wellbeing			Refugee				
English/ESOL need			Maths ne	ed			
Reason for the need					•		
Is this course a progression to last year's course you ran		Yes / No		How many learners have expressed a commitment to progressing?			
If this is not progression, how have you identified a need for this (these) courses?				How many learners have you already identified?			
How will you recruit for these courses?							
What key issues/barriers to recruitment have you identified?							
What actions will you take and what support do you need from the EAL team?							
Match funding/ Pound Plus details:							

About the premises

Where will this course be delivered? (Please check our list of priority wards, in the guidance) Address:

					O a manufacture l'incluse al		
Wheelchair Access to rooms	Disabled Toilet	IT access	Internet access	Photocopier on site	Computer linked to a projector or an IWB for the tutor	Water/sink availability in the room (for art or beauty courses)	White Board with Markers
Adult size tables and chairs in the classroom	Any sound equipment e.g. CD Player	Appropriate furniture to accommodate proposed learning activities		Any Storage	Transport links to the venue?	Parking facilities	Kitchen for learne use

Only complete this area if your staff are delivering the course(s)						
About course 1						
How will this course be delivered?						
Teaching strategies:						
•						
•						
State the main course aims						
•						
•						
Please state what the learners will be able to do by the end of the course.						
•						
•						
Please state progression/ volunteering						
opportunities?						
	About course 2					
How will this course be delivered?						
Teaching strategies:						

•

State the main course aims
•
•
Please state what the learners will be able to do by the end of the course.
•
•
Please state progression/ volunteering
opportunities?

Please note the centre must pass a health and safety inspection prior to the start of any course. Any additional information you would like to add

Please complete and return this form to: adultlearning@ealing.gov.uk





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