



Short Course Enrolment Form

If you require this application form in large print or need help completing it please call 01752 305300



Short Course Enrolment Form (for full cost courses of ten days or less)

Please complete sections A - E in BLOCK CAPITALS in black ink only

SECTION A: COURSE DETAILS

Start Date Month Year Course Code
Course Title

SECTION B: PERSONAL DETAILS

Title (Mr, Mrs, Miss, Ms) Other First name(s)
Known as Family name (surname)
Date of Birth Day Month Year
National Insurance Number

Home Address
 Postcode

E-mail Address

Telephone Numbers Home Mobile

SECTION C: EMPLOYER INFORMATION - please complete if your employer is paying for your course

Name of Organisation
Contact at Organisation
Contact's Position at Organisation
Contact's Telephone Number
Contact's E-mail Address

SECTION D: SUPPORT FOR YOUR COURSE

Extra Support

Please let us know if you require extra support to help you complete the course by giving details below

SECTION E: ENROLMENT AGREEMENT

Data Protection

Please read the following statements and tick the appropriate boxes. Please then sign and date where indicated.

I consent to City College Plymouth collecting and processing my personal data, including special category data, under the General Data Protection Regulation 2018. I understand the College also processes my personal data as part of its public interest task in providing education to me, to comply with legal and statutory obligations and to ensure performance of the contract in relation to the academic year of the course I have applied for.

The information you supply is used by the Education and Skills Funding Agency, an executive agency of the Department for Education (DfE), to issue you with a Unique Learner Number and to create your Personal Learning Record as part of the functions of the DfE. For more information about how your information is processed and to access your Personal Learning Record, please visit www.gov.uk/government/publications/lrs-privacy-notice.

I have read the further details about how the College processes my personal data which are contained in the College's Privacy Notice, available on the College website (www.cityplym.ac.uk/privacy-notice).

I confirm that I have read and agree to abide by the Terms and Conditions of Enrolment, which can be found on the College website (www.cityplym.ac.uk). I agree that all of the information on this form is correct.

I consent to City College Plymouth providing to my employer details of my educational records, including but not limited to, attendance, achievement and modular outcomes. I acknowledge that any certificate of achievement may be sent, by the College, to my employer who will forward it on to me.

The College will send you information about your course. However, we would also like to send you information about other learning opportunities, courses and events. If you wish to receive this information please let us know by ticking this box

Signature

Day

Month

Year

Thank you for completing this application form.

Please save this file to your desktop then e-mail as an attachment to: customerservice@achievementtraining.com