

**GRANT APPLICATION FORM FOR EARLY YEARS, CHILDCARE AND PLAYWORK
COURSES, INCLUDING GRADUATE LEADER FUND
PLEASE COMPLETE ALL SECTIONS IN BLOCK CAPITALS ON BOTH SIDES**

Please note: Qualification funding applications **MUST** be submitted no later than 31st January 2010 to be considered in this financial year 2009/2010.

TRAINING / QUALIFICATION DETAILS

College / Training Provider:	
Full Name of Course / Qualification:	
Course Level:	
Course Start Date:	Course Duration/End date:

YOUR DETAILS

Name:	Male/Female:
Home Address:	Email:
	Postcode:
Home Tel No:	Job Title:
Place of work:	
Name of setting:	
NB: If you work in a school, do you also work in the: After-school Club / Breakfast Club / separate Pre-School which is not attached to the school Please circle or write 'None'	
Setting type: PLEASE CIRCLE WHICH YOUR SETTING IS: Sessional OR Full day care	
Work Address:	
	Work Post code:
Work Tel No:	Manager's Name:
Work email:	

Oxfordshire County Council is committed to making sure learning opportunities are available to all sections of the community. Please provide the following information about yourself to help us monitor the take-up of training.

WHICH OF THESE DO YOU CONSIDER DESCRIBES YOUR ETHNIC ORIGIN?

- | | |
|--|---|
| <input type="checkbox"/> Asian or Asian British – Bangladeshi | <input type="checkbox"/> Mixed – White and Black African |
| <input type="checkbox"/> Asian or Asian British – Indian | <input type="checkbox"/> Mixed – White and Black Caribbean |
| <input type="checkbox"/> Asian or Asian British – Pakistani | <input type="checkbox"/> Mixed – any other mixed background |
| <input type="checkbox"/> Asian or Asian British – any other Asian background | <input type="checkbox"/> White British |
| <input type="checkbox"/> Black or Black British – African | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Black or Black British – Caribbean | <input type="checkbox"/> White – any other White background |
| <input type="checkbox"/> Black or Black British – any other Black background | <input type="checkbox"/> Any other |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Not known/not provided |
| <input type="checkbox"/> Mixed – White and Asian | |

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DISABILITY

Do you have a physical or mental impairment, which has a substantial and long-term adverse effect upon your ability to carry out normal day-to-day activities?

Please circle Yes/No

FINANCIAL INFORMATION

Course cost:

Total Course fee £

OR Total registration fee £

THE LEARNER APPLYING FOR THE GRANT: PLEASE ANSWER THE FOLLOWING QUESTIONS

1. Do you already have a level 2 or level 3 qualification? Please circle YES / NO

2. If 'YES' please give name and level of qualification.....

3. If you are applying for an NVQ level 2 or 3 you need to ask your training provider if you are eligible for 'Train To Gain' funding before we can assess your application.

I confirm that I have asked the college/training provider about Train to Gain funding and that 'I AM' / 'I AM NOT' eligible for Train to Gain funding (please circle which applies).

4. NOW please print name and sign below.

Name:

Signature:

NB: We will not be able to process your form until you have signed this confirmation

THE MANAGER / SUPERVISOR OF THE SETTING

I confirm that the details on this form are correct. (please print name and sign below)

Name:

Signature:

In accordance with the Data Protection Act 1998, Oxfordshire County Council will use information given on this form for the administration of the Oxfordshire Sure Start Early Years and Childcare Grant, and to monitor the take-up of training.

Please send your completed form to:

Quality Workforce Development Officer

Early Learning and Childcare

County Hall

New Road

Oxford OX1 1ND Tel: 0845 604 23 46 Fax: 0845 605 41 61



SureStart