

Please return your completed application form to:

- Future Skills Sandwell • Block 300 • Smethwick Enterprise Centre • Rolfe Street • Smethwick • B66 2AR
- Tel: 0121 555 4350 • Fax: 0121 555 4360 • Email: future_skills@sandwell.gov.uk
- www.futureskillssandwell.com

WHICH AREA(S) OF TRAINING ARE YOU INTERESTED IN?

(if you are interested in more than one area, please indicate choice by number 1,2,3 etc)

Construction:

Bricklaying	<input type="checkbox"/>	Carpentry	<input type="checkbox"/>	Painting and Decorating	<input type="checkbox"/>	Plastering	<input type="checkbox"/>
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Administration:

Administration	<input type="checkbox"/>	Customer Services	<input type="checkbox"/>	IT	<input type="checkbox"/>
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PERSONAL DETAILS

Surname: <input type="text"/>	Unique Individual Learner Number (if known) <input type="text"/>
Address: <input type="text"/>	First name(s): <input type="text"/>
<input type="text"/>	Date of Birth: <input type="text"/> Age: <input type="text"/>
<input type="text"/>	National Insurance No: <input type="text"/>
Postcode: <input type="text"/>	Telephone: Home <input type="text"/>
	Mobile <input type="text"/>
	Email address: <input type="text"/>
Do you have a Connexions PA? If so, please state their name and telephone number or local office.	<input type="text"/>

EDUCATION DETAILS (Secondary Education - School(s) / College(s) attended)

Name of School / College	Leaving Date
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

QUALIFICATIONS GAINED (or anticipated)

Subject	Level (GCSE, GNVQ etc)	Predicted grades (if exams not yet taken)	Actual grades (if known)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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WORK EXPERIENCE DETAILS

Name of Company/Organisation	Length of time in placement	Brief description of duties

EMPLOYMENT DETAILS (if any)

Current or most recent Employers Name and Address	Dates Employed	Brief description of duties
Previous Employers Name and Address	Dates Employed	Brief description of duties

If you already have an employer relevant to your apprentice trade, please state contact name, address and telephone number:

REFERENCES: Please give name and contact details of two people who are willing to give you a reference: (eg your Headteacher, previous employer etc)

1.	2.

EQUAL OPPORTUNITIES

Future Skills and Sandwell MBC is committed to an Equal Opportunities Policy. We welcome applications from all individuals regardless of gender, origin or disability. To help us to monitor that this policy is working please indicate your Gender and Ethnic Origin below (tick box).

GENDER Male Female

ETHNICITY

Asian or Asian British - Bangladeshi (11)	Asian or Asian British - Other (14)	Black or Black British - Other (17)	Mixed - White and Black African (20)	White - British (23)
Asian or Asian British - Indian (12)	Black or Black British - African (15)	Chinese (18)	Mixed - White and Black Caribbean (21)	White - Irish (24)
Asian or Asian British - Pakistani (13)	Black or Black British - Caribbean (16)	Mixed White and Asian (19)	Mixed Any other mixed background (22)	White - Other background (25)
				Other

Do you have any illnesses, take any medication, have a disability and/or learning difficulty, or do you require any other support? YES NO

If yes, please give brief details and indicate whether any adjustments may be necessary:

Under the Data Protection Act, you have certain rights regarding the use of personal data. By signing this form you are giving your consent to Future Skills to process and verify the information you have given. We may also share this information with our training partners.

Signed:

Date:

If you have any other relevant information concerning your experience, additional sheets may be attached, however please ensure you state your name clearly on any attachments.