**DOCUMENT CONTROL**

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| **Title:**  | **WE Work for Everyone Participant Enrolment Form** |
| **Author:**  | E Ahn  | **Sponsor:**  | J Taylor |
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| V 1.2 | 06/05/2021 | Equality Monitoring: migrant status question removed |
| V 1.3 | 20/08/2021 | Soft Skills section removed |
| V 1.4 | 04/10/2021 | Referral source added. Reworded Employment Status options on starting |
| V 1.5 | 30/05/2022 | Covid -19 signature section removed |
| V 1.6  | 17/08/2022 | Version control added |

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| You need to complete this form in full to be registered on the WE Work for Everyone programme, which is part-funded by the European Social Fund (ESF) and delivered by Bristol City Council.Information provided will be treated confidentially and in accordance with the General Data Protection Regulation (GDPR) and UK Data Protection Laws (UK GDPR & DPA 2018). You can view our [Privacy Notice here](https://drive.google.com/file/d/1f5EWDFALa6f0NgrIzfpdJJI56Ja9STQM/view). Personal and sensitive information will be used solely for the purpose of equalities monitoring to ensure that everyone is treated fairly. The information you provide will be stored by the Council and used to compile anonymous statistics to inform the Council and its funding partners. |

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| 1. **Referral Source**
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| --- |
| 1. I am completing this form for myself (self-referral)
 |[ ]
|  *If you’ve ticked box A, please skip to Question 2* |
| 1. I am completing this form on behalf of someone else
 |[ ]
|  Name of referrer: Click or tap here to enter text. |
|  |
| * + 1. I’m a parent/guardian/relative/friend
 |[ ]
| * + 1. I’m a professional working with this person
 | [ ]  |
| Name of Organisation: *(eg. Temple St Job Centre, BCC team, FE College)* |
| Click or tap here to enter text. |

 |
| 1. **Personal details**
 |
| First Name(s): Surname: Gender:

|  |  |  |
| --- | --- | --- |
| Male [ ]  | Female [ ]  | Other [ ]  |

Date of Birth: Click or tap to enter a date.Address:Post Code Phone number: Email address:  |
| 1. **Right to live and work in the UK**
 |
|

|  |  |  |
| --- | --- | --- |
| Are you British? | Yes [ ] *Go to section 4* *‘Employment Status’*  | No [ ]  |

|  |
| --- |
| What is your nationality? *Only answer this part if you’re not British.* Do you have right to work in the UK? (select the option that best describe your immigration status from list below)  |

|  |
| --- |
| * Yes, I am a EU, EEA, Swiss citizen with settled/pre-settled status
 |[ ]
| * Yes, I have a permanent residence in the UK (indefinite leave to remain)
 |[ ]
| * Yes, I have other visas that allow me to work
 |[ ]
| * Yes, I have a refugee status (with permission to work)
 |[ ]
| * No/Other: Click or tap here to enter text.
 |  |

 |
| 1. **Employment Status on joining**
 |
| Threatened with redundancy  |[ ]  Short-term unemployed *only select if you’re receiving income related benefits (JSA/ESA/Universal Credit)*  |[ ]  In education Or training |[ ]   |
| Zero hours contract / casual work contract |[ ]  Long-term (more than 12 months) unemployed *only select if you receive income related benefits- JSA/ESA/Universal Credit*  |[ ]  Not looking for work but not in Education, employment, or training (NEET)  |[ ]   |
| Self-employed |[ ]  Unemployed, but not in receipt of any benefits  |[ ]  Not available for work currently as you’re a lead carer for a family member full time or for a dependent child under 2  |[ ]   |
|

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| I**nforming benefit providers of change** Your entitlement to benefits could be affected by decisions you take, or changes and progress you make while or after engaging with the We Work for Everyone programme.It is vital to inform all relevant agencies about any changes to your work hours and pay, even if you think your benefits will not be affected. It is your responsibility to inform all relevant agencies of changes to your circumstances, although your Navigator can support you with this process if needed. |

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| 1. **Highest level of educational attainment (on joining)**
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|  |
| --- |
| No Formal Qualification /below primary level education |[ ]
| NVQ Level 1 (e.g. GCSEs Grades D – G ) |[ ]
| NVQ Level 2 (e.g. GCSEs Grades A\* – C  |[ ]
| NVQ Level 3 (e.g. A Levels) |[ ]
| NVQ Level 4 (Certificates of higher education) or over   |[ ]
| Any other qualification?Click or tap here to enter text. |[ ]

|  |  |  |
| --- | --- | --- |
| Is English your first or main language?  | Yes [ ]  | No [ ]  |

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| 1. **Equalities Monitoring**
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| We want to make sure that our services are fair and provided to those who need them. The information you provide will be used to help us to plan your support. By answering these questions, you will help us improve what we do and make our services more accessible. If you do not wish to answer any questions below, please tick ‘prefer not to answer’. **Ethnic Background\***

|  |
| --- |
| White – British   |[ ]
| White – Irish  |[ ]
| White – other EU |[ ]
| Traveller / Gypsy  |[ ]
| White – Other (please specify)  | [ ]  Click or tap here to enter text.  |
| Mixed – White and Black Caribbean  |[ ]
| Mixed – White and Black African  |[ ]
| Mixed – White and Asian |[ ]
| Mixed – Other  |[ ]
| South Asian or Asian British – Indian |[ ]
| South Asian or Asian British – Pakistani |[ ]
| South Asian or Asian British – Bangladeshi |[ ]
| South Asian or Asian British – Other  |[ ]
| Chinese  |[ ]
| Black or Black British – Caribbean  |[ ]
| Black or Black British – African |[ ]
| Black or Black British – Other  |[ ]
| Other (please specify) | [ ]  Click or tap here to enter text.  |
| Prefer not to say  |[ ]

 |
| **7. Disability\*** |
| Would you class yourself as disabled?

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]   | Prefer Not to answer [ ]   |

 |
| If yes, are you:Visually impaired/ blind

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]  | Prefer Not to answer [ ]  |

Hearing impaired / Deaf

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]  | Prefer Not to answer [ ]  |

Mental Health Issues

|  |  |  |
| --- | --- | --- |
| Yes [ ]   | No [ ]  | Prefer Not to answer [ ]  |

Learning Difficulty

|  |  |  |
| --- | --- | --- |
| Yes [ ]   | No [ ]  | Prefer Not to answer [ ]  |

Autism Spectrum Disorder/Asperger’s

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No[ ]  | Prefer Not to answer [ ]  |

Other Physical Disability

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]  | Prefer Not to answer [ ]  |

Other work limiting illness or condition

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]  | Prefer Not to answer [ ]  |

(please specify) \_Click or tap here to enter text.\_\_ |
| 1. **Household information**
 |
| **Are you** From a jobless household?

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]   | Prefer Not to answer [ ]  |

From a jobless household with dependent child/ren?

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]   | Prefer Not to answer [ ]  |

Single Parent / Carer?

|  |  |  |
| --- | --- | --- |
| Yes [ ]   | No [ ]  | Prefer Not to answer [ ]  |

Homeless?

|  |  |  |
| --- | --- | --- |
| Yes [ ]  | No [ ]  | Prefer Not to answer [ ]  |

An ex-offender?

|  |  |  |
| --- | --- | --- |
| Yes [ ]   | No [ ]  | Prefer Not to answer [ ]  |

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| 1. **Obtaining/disclosing information**
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|  |  |
| --- | --- |
| I understand that my personal information will be held by WE Work for Everyone, and that it may be shared with referral organisations only with my permission *(tick box)* | Yes [ ]  |
| I understand that WE Work for Everyone and partner organisations may contact me for evaluation purposes (satisfaction survey) *(tick box)*  | Yes [ ]   |

 By signing this form, you:  1. Have been informed and understand that the activity delivered by the provider named on this form is part-funded by the European Social Fund and have received leaflet ESF2020.
2. Understand that this ESF Provision is voluntary.
3. Agree to participate in this ESF Provision.
4. Understand that WE Work for Everyone will store your basic personal information included on this form, to make referral to the Provider.
5. Understand that, if eligible, you will meet navigators to receive 1-2-1 support best tailored to you from our single menu of opportunities.
6. Understand that, our staff may refuse to support those who behave in a discriminatory, offensive, aggressive or disruptive manner.
7. Give consent for us to stay in touch with you to monitor your progress and provide support for up to 6 months from when you join a training programme or employment.  You can choose any mode of communication you prefer – a phone call, SMS, Email or by post. You can opt out of staying in touch after 6 months

  I understand and accept the commitment expected of me while engaging with the programme  |
| Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    (Wet signature is required)  Date \_\_\_\_\_\_\_\_\_   |

For office use

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| **Project Name**  | We WORK for Everyone  |
| **Participant Reference Number**  |    |
| **Evidence 1** **ID/Right to work in the UK** | You should NOT keep copies of passports/birth certificates/identity cards but put passport/serial number here.  |
| **Evidence 2**  | Employment status  All other evidence should be copied and retained. In the case of the documents not to be retained, you will need to note the participant’s file with the type of identity document seen and their reference/serial number.  |
| **Evidence 3**  | Proof of address |
| **Other**  | Academic qualification (not essential part of provision) |