

SVQ Application Form

Which course are you applying for?

SVQ in Children and Young People	SCQF Level 7 (SVQ3) MA Extended Day Release Programme SCQF Level 7 (SVQ3) Taught Evening Programme SCQF Level 9 (SVQ4) Open Assessment	SCQF Level 7 (SVQ3) MA Extended Evening Programme SCQF Level 7 (SVQ3) Open Assessment
SVQ in Social Services and Healthcare	SCQF Level 6 (SVQ2) Open Assessment SCQF Level 9 (SVQ4) Open Assessment	SCQF Level 7 (SVQ3) Open Assessment
SVQ in Management	SCQF Level 9 (SVQ4) Open Assessment	CSLM units

SECTION A YOUR DETAILS

Please tell us how you heard about this course?	Employer TfC Marketing Email	Internet Search/Website Friend/Relative	Social Media Other
Forename(s)	_____	Middle Name(s)	_____
Surname	_____	Preferred name <small>(if different from above)</small>	_____
Date of Birth	_____		
Home Address	_____		
Town/City	_____	Postcode	_____
Email Address	_____		
	We will use this email address to send you correspondence about your course		
Mobile Phone No.	_____	Home Phone No.	_____
Workplace Name	_____		
Workplace Address	_____		
Town/City	_____	Postcode	_____
Workplace Phone No.	_____		
Current Job Title	_____	Date of Employment	_____
Is your position full time or part time?	full time	part time	
If you work part time, what are your average working hours per week?	_____		
What shifts do you work?	day shift	night shift	both day shift & night shift
If you know your 9-digit SQA Scottish Candidate Number (SCN) please enter it here:			

SECTION B EMPLOYMENT AND TRAINING

1. Please attach a copy of your current job description (if available). *Attached* *Not Attached*
2. a) If you *have not* attached your job description, please describe fully your role and responsibilities in your current position. If you *have*, you can use this space to add any details which you think are relevant to your application.

b) What is your involvement in the planning, feedback and review process of the people you support?

3. a) Looking at your full employment history since leaving school, for how long have you worked altogether in childcare or adult care?

_____ Years _____ Months

b) Please detail your employment in the childcare or adult care sector, along with any other employment relevant to your application.

Employer	Job Title	Employment Dates

4. a) Is English your first language Yes No – My first language is _____.

If no, do you experience any difficulties with reading or writing English Yes No

b) Do you have any additional support needs (mental or physical e.g. anxiety, dyslexia, ADHD)? If yes, please give some brief information here about how we may be able to support you through your award and this will be discussed with you as part of our interview process.

5. a) Do you have regular access to a pc or laptop with word software and internet access? YES NO

(please note smartphones are not compatible with our online portfolio system, VQFolio).

b) How confident are you in your computer skills? Very Confident Confident Not Confident

6. Please list any qualifications, other courses and training relevant to your job role and the proposed SVQ.

Course Title	Level Achieved	Course Title	Level Achieved

SECTION C FUNDING

How will your course be funded? You **must** select one of the funding categories below, and complete all of the information requested for your selection.

Modern Apprenticeship (see our website for information on eligibility)

Age: 16 – 19 20 – 24 25+ 20 – 29 (Disabled/Additional support needs/Care experienced, see our website for info)

What is your National Insurance number? _____

To be eligible for MA funding you must be able to answer 'No' to the following questions

- | | | |
|--|-----|----|
| 1. Are you subject to an employment restriction on your stay in Great Britain | Yes | No |
| 2. Do you currently attend any other Government funded training e.g. university, FE college or school? | Yes | No |

Please answer also answer the following question as it may affect the amount of funding you can receive

- | | | |
|---|-----|----|
| 3. Have you had Modern Apprenticeship funding for a social care or childcare award in the last 3 years? | Yes | No |
|---|-----|----|

If you have answered yes, please give details of the SVQ level and title, year started and whether fully or partially completed:

Please list your qualifications (qualifications from school and further education)

Course Title	Level Achieved	Course Title	Level Achieved

SAAS Part Time Fee Grant (PTFG) – SVQ 3 and 4 only

If you are using SAAS PTFG who is paying the rest of the fee? Candidate Employer*

Please see our website for information on how to apply for the grant.

*Please note if your employer is using VSDF funding you are not eligible for SAAS PTFG

No Funding Support

If you are not using either MA or SAAS PTFG, who is paying the fee? Candidate Employer

By signing you agree to the information on this form being processed in line with our Privacy Information Notice (PIN) (please go to our website to view our [PIN](#) or email info@tfcscotland.org.uk if you wish to be sent a copy)

Signature*

Date

*a typed signature is acceptable

Please now pass the form to your employer to complete section D

SECTION D TO BE COMPLETED BY THE CANDIDATE'S EMPLOYER

Candidate Selection

Selection procedures focus on the abilities, commitment and employment position of the candidate and on the commitment and capacity of the candidate's employer to support the qualification process.

Support for Candidates within the Workplace

Provision of an appropriately qualified, experienced and motivated workplace mentor is a requirement to:

- Support the candidate's development of knowledge and skills both as preparation for assessment and post-assessment following feedback
- Support the candidate in meeting agreed deadlines (please note extended deadlines may incur additional costs as set out in the employer contract)
- Provide Witness Testimony evidence for candidates when requested
- Support candidate in preparing for planned visits
- Meet the assessor following direct observations and participate in feedback
- Highlight any concerns to the assessor
- Monitor progress regularly through discussion with candidate and, where agreed, viewing Learning Assistant contact diary
- Follow up any reports from the assessor regarding candidate progress

Award Management and Payment of Fees

Individualised targets for award progression and completion are scheduled with the candidate at the start of the programme according to experience and ability. If targets are not met and additional inputs are required it may be necessary, where reasonable, to charge an additional fee however this will be discussed and agreed with the employer prior to the work being carried out.

ORGANISATION DETAILS

Organisation Name _____

Head Office Address _____

Postcode _____

Phone _____

General Email _____

We would like to receive email updates about Tfc's courses

CONTACT DETAILS FOR CORRESPONDENCE *N.B. correspondence includes initial documentation and confidential progress reports*

Name _____

Position _____

Address _____

Postcode _____

Phone _____

Email _____

I would like to receive email updates about Tfc's courses

INVOICE CONTACT DETAILS

Name _____

Email _____

Phone _____

MENTOR DETAILS

Name _____

Position _____

Email _____

Phone _____

Please complete all details in the contact and mentor sections above and sign below to confirm your support for the candidate's application as set out in this document, including any funding commitments indicated on the previous page and in the programme publicity and information.

For our records, are you receiving VSDF Funding for the candidate?

(Please note if you are using VSDF, candidates can not apply for SAAS PTFG)

Yes

No

If you have not used Training for Care before, please tell us how you heard about this course?

Employer

Internet Search/Website

Social Media

Tfc Marketing Email

Friend/Relative

Other

By signing you also agree to the information on this form being processed in line with our Privacy Information Notice (PIN) (please go to our website to view our [PIN](#) or email info@tfcscotland.org.uk if you wish to be sent a copy)

Name _____

Position _____

Signature* _____

Date _____

*a typed signature is acceptable

**Please email completed application to: info@tfcscotland.org.uk
(or post to Training for Care, Norton Park, 57 Albion Road, Edinburgh, EH7 5QY)**